

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$23,202,053	\$21,808,000	(\$1,394,053)	-6%
2	Short Term Investments	\$497,349	\$38,000	(\$459,349)	-92%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$25,440,911	\$31,789,000	\$6,348,089	25%
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,966,806	\$924,000	(\$1,042,806)	-53%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$2,559,525	\$2,616,365	\$56,840	2%
8	Prepaid Expenses	\$1,020,603	\$1,331,305	\$310,702	30%
9	Other Current Assets	\$5,155,367	\$1,895,330	(\$3,260,037)	-63%
	<b>Total Current Assets</b>	<b>\$59,842,614</b>	<b>\$60,402,000</b>	<b>\$559,386</b>	<b>1%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$16,548,938	\$14,299,000	(\$2,249,938)	-14%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$3,176,250	\$3,182,000	\$5,750	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$19,725,188</b>	<b>\$17,481,000</b>	<b>(\$2,244,188)</b>	<b>-11%</b>
5	Interest in Net Assets of Foundation	\$4,208,684	\$4,495,000	\$286,316	7%
6	Long Term Investments	\$13,943,997	\$16,044,000	\$2,100,003	15%
7	Other Noncurrent Assets	\$12,329,278	\$17,779,000	\$5,449,722	44%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$167,007,953	\$165,577,000	(\$1,430,953)	-1%
2	Less: Accumulated Depreciation	\$113,942,043	\$111,555,000	(\$2,387,043)	-2%
	<b>Property, Plant and Equipment, Net</b>	<b>\$53,065,910</b>	<b>\$54,022,000</b>	<b>\$956,090</b>	<b>2%</b>
3	Construction in Progress	\$0	\$0	\$0	0%
	<b>Total Net Fixed Assets</b>	<b>\$53,065,910</b>	<b>\$54,022,000</b>	<b>\$956,090</b>	<b>2%</b>
	<b>Total Assets</b>	<b>\$163,115,671</b>	<b>\$170,223,000</b>	<b>\$7,107,329</b>	<b>4%</b>

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(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. <b>LIABILITIES AND NET ASSETS</b>					
A. <b>Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$17,378,400	\$16,956,000	(\$422,400)	-2%
2	Salaries, Wages and Payroll Taxes	\$3,349,897	\$3,881,000	\$531,103	16%
3	Due To Third Party Payers	\$9,296,916	\$7,007,000	(\$2,289,916)	-25%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$2,319,737	\$1,806,000	(\$513,737)	-22%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$6,522,475	\$8,577,000	\$2,054,525	31%
	<b>Total Current Liabilities</b>	<b>\$38,867,425</b>	<b>\$38,227,000</b>	<b>(\$640,425)</b>	<b>-2%</b>
B. <b>Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$23,023,958	\$21,341,000	(\$1,682,958)	-7%
2	Notes Payable (Net of Current Portion)	\$93,125	\$0	(\$93,125)	-100%
	<b>Total Long Term Debt</b>	<b>\$23,117,083</b>	<b>\$21,341,000</b>	<b>(\$1,776,083)</b>	<b>-8%</b>
3	Accrued Pension Liability	\$75,050,923	\$79,738,000	\$4,687,077	6%
4	Other Long Term Liabilities	\$12,454,069	\$12,993,000	\$538,931	4%
	<b>Total Long Term Liabilities</b>	<b>\$110,622,075</b>	<b>\$114,072,000</b>	<b>\$3,449,925</b>	<b>3%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. <b>Net Assets:</b>					
1	Unrestricted Net Assets or Equity	(\$2,602,946)	\$72,000	\$2,674,946	-103%
2	Temporarily Restricted Net Assets	\$2,554,350	\$2,546,000	(\$8,350)	0%
3	Permanently Restricted Net Assets	\$13,674,767	\$15,306,000	\$1,631,233	12%
	<b>Total Net Assets</b>	<b>\$13,626,171</b>	<b>\$17,924,000</b>	<b>\$4,297,829</b>	<b>32%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$163,115,671</b>	<b>\$170,223,000</b>	<b>\$7,107,329</b>	<b>4%</b>

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$509,570,825	\$571,618,009	\$62,047,184	12%
2	Less: Allowances	\$301,586,481	\$345,491,006	\$43,904,525	15%
3	Less: Charity Care	\$629,000	\$384,059	(\$244,941)	-39%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$207,355,344</b>	<b>\$225,742,944</b>	<b>\$18,387,600</b>	<b>9%</b>
5	Other Operating Revenue	\$5,226,127	\$5,263,891	\$37,764	1%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$212,581,471</b>	<b>\$231,006,835</b>	<b>\$18,425,364</b>	<b>9%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$76,501,024	\$84,598,957	\$8,097,933	11%
2	Fringe Benefits	\$23,348,237	\$26,572,268	\$3,224,031	14%
3	Physicians Fees	\$3,570,969	\$2,850,080	(\$720,889)	-20%
4	Supplies and Drugs	\$28,498,290	\$33,137,667	\$4,639,377	16%
5	Depreciation and Amortization	\$7,469,946	\$8,637,599	\$1,167,653	16%
6	Bad Debts	\$7,589,833	\$10,501,359	\$2,911,526	38%
7	Interest	\$1,198,337	\$1,616,544	\$418,207	35%
8	Malpractice	\$5,374,420	\$3,299,973	(\$2,074,447)	-39%
9	Other Operating Expenses	\$52,135,818	\$47,170,185	(\$4,965,633)	-10%
	<b>Total Operating Expenses</b>	<b>\$205,686,874</b>	<b>\$218,384,632</b>	<b>\$12,697,758</b>	<b>6%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$6,894,597</b>	<b>\$12,622,203</b>	<b>\$5,727,606</b>	<b>83%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$733,709	\$1,224,594	\$490,885	67%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$1,870,080)	\$1,189,130	\$3,059,210	-164%
	<b>Total Non-Operating Revenue</b>	<b>(\$1,136,371)</b>	<b>\$2,413,724</b>	<b>\$3,550,095</b>	<b>-312%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$5,758,226</b>	<b>\$15,035,927</b>	<b>\$9,277,701</b>	<b>161%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$5,758,226</b>	<b>\$15,035,927</b>	<b>\$9,277,701</b>	<b>161%</b>
	Principal Payments	\$3,128,000	\$2,310,000	(\$818,000)	-26%

**SAINT MARY'S HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2012  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$110,870,174	\$105,687,037	(\$5,183,137)	-5%
2	MEDICARE MANAGED CARE	\$23,726,563	\$26,810,948	\$3,084,385	13%
3	MEDICAID	\$29,888,465	\$41,055,863	\$11,167,398	37%
4	MEDICAID MANAGED CARE	\$13,517,829	\$3,442,723	(\$10,075,106)	-75%
5	CHAMPUS/TRICARE	\$272,321	\$139,608	(\$132,713)	-49%
6	COMMERCIAL INSURANCE	\$4,385,722	\$3,544,985	(\$840,737)	-19%
7	NON-GOVERNMENT MANAGED CARE	\$59,136,445	\$58,126,164	(\$1,010,281)	-2%
8	WORKER'S COMPENSATION	\$7,092,383	\$6,448,669	(\$643,714)	-9%
9	SELF- PAY/UNINSURED	\$1,346,229	\$2,175,963	\$829,734	62%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$250,236,131</b>	<b>\$247,431,960</b>	<b>(\$2,804,171)</b>	<b>-1%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$55,170,504	\$70,525,808	\$15,355,304	28%
2	MEDICARE MANAGED CARE	\$13,195,373	\$20,668,274	\$7,472,901	57%
3	MEDICAID	\$36,283,206	\$78,313,865	\$42,030,659	116%
4	MEDICAID MANAGED CARE	\$41,818,070	\$10,938,979	(\$30,879,091)	-74%
5	CHAMPUS/TRICARE	\$641,500	\$654,304	\$12,804	2%
6	COMMERCIAL INSURANCE	\$8,504,583	\$8,796,265	\$291,682	3%
7	NON-GOVERNMENT MANAGED CARE	\$91,967,156	\$114,026,268	\$22,059,112	24%
8	WORKER'S COMPENSATION	\$5,330,916	\$7,977,703	\$2,646,787	50%
9	SELF- PAY/UNINSURED	\$6,423,387	\$12,284,583	\$5,861,196	91%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$259,334,695</b>	<b>\$324,186,049</b>	<b>\$64,851,354</b>	<b>25%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$166,040,678	\$176,212,845	\$10,172,167	6%
2	MEDICARE MANAGED CARE	\$36,921,936	\$47,479,222	\$10,557,286	29%
3	MEDICAID	\$66,171,671	\$119,369,728	\$53,198,057	80%
4	MEDICAID MANAGED CARE	\$55,335,899	\$14,381,702	(\$40,954,197)	-74%
5	CHAMPUS/TRICARE	\$913,821	\$793,912	(\$119,909)	-13%
6	COMMERCIAL INSURANCE	\$12,890,305	\$12,341,250	(\$549,055)	-4%
7	NON-GOVERNMENT MANAGED CARE	\$151,103,601	\$172,152,432	\$21,048,831	14%
8	WORKER'S COMPENSATION	\$12,423,299	\$14,426,372	\$2,003,073	16%
9	SELF- PAY/UNINSURED	\$7,769,616	\$14,460,546	\$6,690,930	86%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL GROSS REVENUE</b>	<b>\$509,570,826</b>	<b>\$571,618,009</b>	<b>\$62,047,183</b>	<b>12%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$59,319,143	\$54,388,916	(\$4,930,227)	-8%
2	MEDICARE MANAGED CARE	\$11,939,475	\$11,069,083	(\$870,392)	-7%
3	MEDICAID	\$12,305,513	\$18,145,100	\$5,839,587	47%
4	MEDICAID MANAGED CARE	\$5,547,213	\$1,278,233	(\$4,268,980)	-77%
5	CHAMPUS/TRICARE	\$99,438	\$52,613	(\$46,825)	-47%
6	COMMERCIAL INSURANCE	\$2,305,592	\$1,287,249	(\$1,018,343)	-44%
7	NON-GOVERNMENT MANAGED CARE	\$31,688,290	\$32,536,089	\$847,799	3%
8	WORKER'S COMPENSATION	\$4,293,159	\$4,094,354	(\$198,805)	-5%
9	SELF- PAY/UNINSURED	\$26,510	\$95,854	\$69,344	262%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

**SAINT MARY'S HOSPITAL**  
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**FISCAL YEAR 2012**  
**REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$127,524,333</b>	<b>\$122,947,491</b>	<b>(\$4,576,842)</b>	<b>-4%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$12,673,197	\$14,694,300	\$2,021,103	16%
2	MEDICARE MANAGED CARE	\$3,171,591	\$4,927,548	\$1,755,957	55%
3	MEDICAID	\$6,372,305	\$17,086,845	\$10,714,540	168%
4	MEDICAID MANAGED CARE	\$8,181,911	\$2,195,338	(\$5,986,573)	-73%
5	CHAMPUS/TRICARE	\$161,937	\$157,949	(\$3,988)	-2%
6	COMMERCIAL INSURANCE	\$3,602,689	\$2,565,808	(\$1,036,881)	-29%
7	NON-GOVERNMENT MANAGED CARE	\$28,089,190	\$38,794,165	\$10,704,975	38%
8	WORKER'S COMPENSATION	\$3,826,235	\$5,688,739	\$1,862,504	49%
9	SELF- PAY/UNINSURED	\$238,857	\$424,205	\$185,348	78%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$66,317,912</b>	<b>\$86,534,897</b>	<b>\$20,216,985</b>	<b>30%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$71,992,340	\$69,083,216	(\$2,909,124)	-4%
2	MEDICARE MANAGED CARE	\$15,111,066	\$15,996,631	\$885,565	6%
3	MEDICAID	\$18,677,818	\$35,231,945	\$16,554,127	89%
4	MEDICAID MANAGED CARE	\$13,729,124	\$3,473,571	(\$10,255,553)	-75%
5	CHAMPUS/TRICARE	\$261,375	\$210,562	(\$50,813)	-19%
6	COMMERCIAL INSURANCE	\$5,908,281	\$3,853,057	(\$2,055,224)	-35%
7	NON-GOVERNMENT MANAGED CARE	\$59,777,480	\$71,330,254	\$11,552,774	19%
8	WORKER'S COMPENSATION	\$8,119,394	\$9,783,093	\$1,663,699	20%
9	SELF- PAY/UNINSURED	\$265,367	\$520,059	\$254,692	96%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL NET REVENUE</b>	<b>\$193,842,245</b>	<b>\$209,482,388</b>	<b>\$15,640,143</b>	<b>8%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	4,653	4,187	(466)	-10%
2	MEDICARE MANAGED CARE	923	1,011	88	10%
3	MEDICAID	1,721	2,962	1,241	72%
4	MEDICAID MANAGED CARE	1,476	269	(1,207)	-82%
5	CHAMPUS/TRICARE	26	22	(4)	-15%
6	COMMERCIAL INSURANCE	202	167	(35)	-17%
7	NON-GOVERNMENT MANAGED CARE	3,240	3,131	(109)	-3%
8	WORKER'S COMPENSATION	165	159	(6)	-4%
9	SELF- PAY/UNINSURED	128	170	42	33%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL DISCHARGES</b>	<b>12,534</b>	<b>12,078</b>	<b>(456)</b>	<b>-4%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	24,401	21,019	(3,382)	-14%
2	MEDICARE MANAGED CARE	4,867	5,045	178	4%
3	MEDICAID	8,738	11,865	3,127	36%
4	MEDICAID MANAGED CARE	4,509	851	(3,658)	-81%
5	CHAMPUS/TRICARE	74	56	(18)	-24%
6	COMMERCIAL INSURANCE	812	648	(164)	-20%
7	NON-GOVERNMENT MANAGED CARE	11,668	11,060	(608)	-5%
8	WORKER'S COMPENSATION	474	465	(9)	-2%
9	SELF- PAY/UNINSURED	372	547	175	47%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL PATIENT DAYS</b>	<b>55,915</b>	<b>51,556</b>	<b>(4,359)</b>	<b>-8%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				

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FISCAL YEAR 2012  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	49,367	50,365	998	2%
2	MEDICARE MANAGED CARE	13,887	15,685	1,798	13%
3	MEDICAID	26,423	55,237	28,814	109%
4	MEDICAID MANAGED CARE	36,455	9,145	(27,310)	-75%
5	CHAMPUS/TRICARE	571	407	(164)	-29%
6	COMMERCIAL INSURANCE	6,315	4,404	(1,911)	-30%
7	NON-GOVERNMENT MANAGED CARE	80,539	80,742	203	0%
8	WORKER'S COMPENSATION	2,817	2,973	156	6%
9	SELF- PAY/UNINSURED	8,074	7,224	(850)	-11%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>224,448</b>	<b>226,182</b>	<b>1,734</b>	<b>1%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$15,834,597	\$17,323,957	\$1,489,360	9%
2	MEDICARE MANAGED CARE	\$3,227,734	\$4,234,441	\$1,006,707	31%
3	MEDICAID	\$20,397,943	\$44,322,108	\$23,924,165	117%
4	MEDICAID MANAGED CARE	\$25,375,940	\$7,133,810	(\$18,242,130)	-72%
5	CHAMPUS/TRICARE	\$357,895	\$253,539	(\$104,356)	-29%
6	COMMERCIAL INSURANCE	\$4,125,440	\$3,756,204	(\$369,236)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$20,132,534	\$21,802,709	\$1,670,175	8%
8	WORKER'S COMPENSATION	\$1,308,440	\$1,382,390	\$73,950	6%
9	SELF- PAY/UNINSURED	\$6,546,080	\$8,318,663	\$1,772,583	27%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$97,306,603</b>	<b>\$108,527,821</b>	<b>\$11,221,218</b>	<b>12%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$3,008,775	\$2,781,129	(\$227,646)	-8%
2	MEDICARE MANAGED CARE	\$637,201	\$801,573	\$164,372	26%
3	MEDICAID	\$2,928,824	\$5,972,223	\$3,043,399	104%
4	MEDICAID MANAGED CARE	\$3,954,379	\$1,071,578	(\$2,882,801)	-73%
5	CHAMPUS/TRICARE	\$51,187	\$47,270	(\$3,917)	-8%
6	COMMERCIAL INSURANCE	\$1,567,979	\$746,005	(\$821,974)	-52%
7	NON-GOVERNMENT MANAGED CARE	\$6,503,580	\$6,361,304	(\$142,276)	-2%
8	WORKER'S COMPENSATION	\$942,451	\$911,644	(\$30,807)	-3%
9	SELF- PAY/UNINSURED	\$127,195	\$134,790	\$7,595	6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$19,721,571</b>	<b>\$18,827,516</b>	<b>(\$894,055)</b>	<b>-5%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	7,755	8,017	262	3%
2	MEDICARE MANAGED CARE	1,523	1,910	387	25%
3	MEDICAID	12,918	28,558	15,640	121%
4	MEDICAID MANAGED CARE	20,040	5,088	(14,952)	-75%
5	CHAMPUS/TRICARE	181	149	(32)	-18%
6	COMMERCIAL INSURANCE	2,174	1,964	(210)	-10%
7	NON-GOVERNMENT MANAGED CARE	10,843	11,111	268	2%
8	WORKER'S COMPENSATION	912	887	(25)	-3%
9	SELF- PAY/UNINSURED	4,675	5,284	609	13%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>61,021</b>	<b>62,968</b>	<b>1,947</b>	<b>3%</b>

**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2012**  
**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>I.</b>	<b><u>OPERATING EXPENSE BY CATEGORY</u></b>				
<b>A.</b>	<b><u>Salaries &amp; Wages:</u></b>				
1	Nursing Salaries	\$28,268,013	\$30,432,420	\$2,164,407	8%
2	Physician Salaries	\$2,984,635	\$3,151,771	\$167,136	6%
3	Non-Nursing, Non-Physician Salaries	\$45,248,376	\$51,014,766	\$5,766,390	13%
	<b>Total Salaries &amp; Wages</b>	<b>\$76,501,024</b>	<b>\$84,598,957</b>	<b>\$8,097,933</b>	<b>11%</b>
<b>B.</b>	<b><u>Fringe Benefits:</u></b>				
1	Nursing Fringe Benefits	\$6,406,028	\$7,090,223	\$684,195	11%
2	Physician Fringe Benefits	\$989,413	\$1,050,785	\$61,372	6%
3	Non-Nursing, Non-Physician Fringe Benefits	\$15,952,796	\$18,431,260	\$2,478,464	16%
	<b>Total Fringe Benefits</b>	<b>\$23,348,237</b>	<b>\$26,572,268</b>	<b>\$3,224,031</b>	<b>14%</b>
<b>C.</b>	<b><u>Contractual Labor Fees:</u></b>				
1	Nursing Fees	\$0	\$0	\$0	0%
2	Physician Fees	\$3,570,969	\$2,850,080	(\$720,889)	-20%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	<b>Total Contractual Labor Fees</b>	<b>\$3,570,969</b>	<b>\$2,850,080</b>	<b>(\$720,889)</b>	<b>-20%</b>
<b>D.</b>	<b><u>Medical Supplies and Pharmaceutical Cost:</u></b>				
1	Medical Supplies	\$22,209,540	\$26,872,228	\$4,662,688	21%
2	Pharmaceutical Costs	\$6,288,750	\$6,265,439	(\$23,311)	0%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$28,498,290</b>	<b>\$33,137,667</b>	<b>\$4,639,377</b>	<b>16%</b>
<b>E.</b>	<b><u>Depreciation and Amortization:</u></b>				
1	Depreciation-Building	\$3,369,991	\$3,737,654	\$367,663	11%
2	Depreciation-Equipment	\$4,031,458	\$4,843,917	\$812,459	20%
3	Amortization	\$68,497	\$56,028	(\$12,469)	-18%
	<b>Total Depreciation and Amortization</b>	<b>\$7,469,946</b>	<b>\$8,637,599</b>	<b>\$1,167,653</b>	<b>16%</b>
<b>F.</b>	<b><u>Bad Debts:</u></b>				
1	Bad Debts	\$7,589,833	\$10,501,359	\$2,911,526	38%
<b>G.</b>	<b><u>Interest Expense:</u></b>				
1	Interest Expense	\$1,198,337	\$1,616,544	\$418,207	35%
<b>H.</b>	<b><u>Malpractice Insurance Cost:</u></b>				
1	Malpractice Insurance Cost	\$5,374,420	\$3,299,973	(\$2,074,447)	-39%
<b>I.</b>	<b><u>Utilities:</u></b>				
1	Water	\$86,854	\$163,254	\$76,400	88%
2	Natural Gas	\$937,275	\$827,202	(\$110,073)	-12%
3	Oil	\$0	\$0	\$0	0%
4	Electricity	\$2,499,764	\$2,060,234	(\$439,530)	-18%
5	Telephone	\$468,300	\$564,802	\$96,502	21%
6	Other Utilities	\$130,976	\$270,641	\$139,665	107%
	<b>Total Utilities</b>	<b>\$4,123,169</b>	<b>\$3,886,133</b>	<b>(\$237,036)</b>	<b>-6%</b>
<b>J.</b>	<b><u>Business Expenses:</u></b>				
1	Accounting Fees	\$241,302	\$302,691	\$61,389	25%
2	Legal Fees	\$2,582,755	\$1,424,164	(\$1,158,591)	-45%
3	Consulting Fees	\$2,240,370	\$1,207,344	(\$1,033,026)	-46%
4	Dues and Membership	\$606,920	\$640,338	\$33,418	6%
5	Equipment Leases	\$0	\$0	\$0	0%
6	Building Leases	\$0	\$0	\$0	0%
7	Repairs and Maintenance	\$5,428,461	\$4,776,825	(\$651,636)	-12%
8	Insurance	\$1,061,232	\$235,325	(\$825,907)	-78%

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**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$165,890	\$162,634	(\$3,256)	-2%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$3,497,570	\$3,268,713	(\$228,857)	-7%
13	Licenses and Subscriptions	\$0	\$0	\$0	0%
14	Postage and Shipping	\$213,889	\$197,521	(\$16,368)	-8%
15	Advertising	\$659,402	\$405,147	(\$254,255)	-39%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$0	\$0	0%
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%
21	Billing & Collection / Bank Fees	\$0	\$0	\$0	0%
22	Recruiting / Employee Education & Recognition	\$0	\$0	\$0	0%
23	Laundry / Linen	\$0	\$0	\$0	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$10,474,736	\$10,474,736	0%
28	Other Business Expenses	\$7,081,673	\$9,798,055	\$2,716,382	38%
	<b>Total Business Expenses</b>	<b>\$23,779,464</b>	<b>\$32,893,493</b>	<b>\$9,114,029</b>	<b>38%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	\$24,233,185	\$10,390,559	(\$13,842,626)	-57%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$205,686,874</b>	<b>\$218,384,632</b>	<b>\$12,697,758</b>	<b>6%</b>
	<b>*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150</b>				
<b>II.</b>	<b><u>OPERATING EXPENSE BY DEPARTMENT</u></b>				
<b>A.</b>	<b><u>General Services:</u></b>				
1	General Administration	\$21,559,859	\$15,620,080	(\$5,939,779)	-28%
2	General Accounting	\$910,399	\$1,116,937	\$206,538	23%
3	Patient Billing & Collection	\$1,972,756	\$2,026,723	\$53,967	3%
4	Admitting / Registration Office	\$1,131,328	\$1,118,637	(\$12,691)	-1%
5	Data Processing	\$5,667,533	\$7,268,407	\$1,600,874	28%
6	Communications	\$616,092	\$656,738	\$40,646	7%
7	Personnel	\$149,144	\$0	(\$149,144)	-100%
8	Public Relations	\$823,913	\$910,957	\$87,044	11%
9	Purchasing	\$0	\$2,402,747	\$2,402,747	0%
10	Dietary and Cafeteria	\$3,619,064	\$3,710,693	\$91,629	3%
11	Housekeeping	\$2,402,699	\$2,434,539	\$31,840	1%
12	Laundry & Linen	\$4,500,581	\$3,937,356	(\$563,225)	-13%
13	Operation of Plant	\$5,686,468	\$4,714,117	(\$972,351)	-17%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$2,030,198	\$2,097,370	\$67,172	3%
16	Central Sterile Supply	\$707,355	\$589,298	(\$118,057)	-17%
17	Pharmacy Department	\$7,325,006	\$7,411,477	\$86,471	1%
18	Other General Services	\$41,923,227	\$48,549,152	\$6,625,925	16%
	<b>Total General Services</b>	<b>\$101,025,622</b>	<b>\$104,565,228</b>	<b>\$3,539,606</b>	<b>4%</b>
<b>B.</b>	<b><u>Professional Services:</u></b>				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$5,059,531	\$4,791,569	(\$267,962)	-5%
3	Nursing Services Administration	\$1,227,943	\$1,204,511	(\$23,432)	-2%
4	Medical Records	\$2,153,469	\$2,488,088	\$334,619	16%



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(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$325,957	\$0	(\$325,957)	-100%
6	Other Professional Services	\$1,828,693	\$2,220,392	\$391,699	21%
	<b>Total Professional Services</b>	<b>\$10,595,593</b>	<b>\$10,704,560</b>	<b>\$108,967</b>	<b>1%</b>
<b>C.</b>	<b><u>Special Services:</u></b>				
1	Operating Room	\$19,171,920	\$16,492,878	(\$2,679,042)	-14%
2	Recovery Room	\$704,845	\$706,535	\$1,690	0%
3	Anesthesiology	\$891,886	\$1,079,681	\$187,795	21%
4	Delivery Room	\$4,053,009	\$4,002,247	(\$50,762)	-1%
5	Diagnostic Radiology	\$4,016,687	\$3,941,206	(\$75,481)	-2%
6	Diagnostic Ultrasound	\$0	\$0	\$0	0%
7	Radiation Therapy	\$646	\$3,941	\$3,295	510%
8	Radioisotopes	\$624,834	\$635,537	\$10,703	2%
9	CT Scan	\$956,172	\$918,068	(\$38,104)	-4%
10	Laboratory	\$10,252,227	\$10,187,739	(\$64,488)	-1%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$6,159,144	\$6,572,088	\$412,944	7%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$795,065	\$843,594	\$48,529	6%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,325,621	\$1,324,958	(\$663)	0%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$128,852	\$334,332	\$205,480	159%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$399,311	\$298,221	(\$101,090)	-25%
24	Emergency Room	\$7,687,498	\$8,096,221	\$408,723	5%
25	MRI	\$868,201	\$771,685	(\$96,516)	-11%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,796,914	\$1,816,665	\$19,751	1%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$0	\$0	0%
	<b>Total Special Services</b>	<b>\$59,832,832</b>	<b>\$58,025,596</b>	<b>(\$1,807,236)</b>	<b>-3%</b>
<b>D.</b>	<b><u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$17,627,304	\$20,815,215	\$3,187,911	18%
2	Intensive Care Unit	\$4,107,783	\$3,802,278	(\$305,505)	-7%
3	Coronary Care Unit	\$1,445,694	\$1,408,122	(\$37,572)	-3%
4	Psychiatric Unit	\$1,715,918	\$1,754,372	\$38,454	2%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$1,602,024	\$1,415,737	(\$186,287)	-12%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$1,273,260	\$1,153,921	(\$119,339)	-9%
11	Home Care	\$0	\$0	\$0	0%

SAINT MARY'S HOSPITAL				
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FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$198,455,064	\$ 207,355,344	\$225,742,944
2	Other Operating Revenue	8,481,266	5,226,127	5,263,891
3	Total Operating Revenue	\$206,936,330	\$212,581,471	\$231,006,835
4	Total Operating Expenses	196,985,263	205,686,874	218,384,632
5	Income/(Loss) From Operations	\$9,951,067	\$6,894,597	\$12,622,203
6	Total Non-Operating Revenue	3,675,712	(1,136,371)	2,413,724
7	Excess/(Deficiency) of Revenue Over Expenses	\$13,626,779	\$5,758,226	\$15,035,927
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	4.72%	3.26%	5.41%
2	Hospital Non Operating Margin	1.75%	-0.54%	1.03%
3	Hospital Total Margin	6.47%	2.72%	6.44%
4	Income/(Loss) From Operations	\$9,951,067	\$6,894,597	\$12,622,203
5	Total Operating Revenue	\$206,936,330	\$212,581,471	\$231,006,835
6	Total Non-Operating Revenue	\$3,675,712	(\$1,136,371)	\$2,413,724
7	Total Revenue	\$210,612,042	\$211,445,100	\$233,420,559
8	Excess/(Deficiency) of Revenue Over Expenses	\$13,626,779	\$5,758,226	\$15,035,927
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$6,754,167	(\$2,602,946)	\$72,000
2	Hospital Total Net Assets	\$23,714,139	\$13,626,171	\$17,924,000
3	Hospital Change in Total Net Assets	\$12,452,829	(\$10,087,968)	\$4,297,829
4	Hospital Change in Total Net Assets %	210.6%	-42.5%	31.5%
<b>D. <u>Cost Data Summary</u></b>				
1	<b><u>Ratio of Cost to Charges</u></b>	<b>0.40</b>	<b>0.40</b>	<b>0.38</b>
2	Total Operating Expenses	\$196,985,263	\$205,686,874	\$218,384,632
3	Total Gross Revenue	\$481,019,806	\$509,570,826	\$571,618,009
4	Total Other Operating Revenue	\$8,481,266	\$7,814,938	\$7,571,760
5	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.00</b>	<b>1.05</b>	<b>1.13</b>
6	Total Non-Government Payments	\$71,119,217	\$74,070,522	\$85,486,463

SAINT MARY'S HOSPITAL				
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REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
7	Total Uninsured Payments	\$249,027	\$265,367	\$520,059
8	Total Non-Government Charges	\$186,327,093	\$184,186,821	\$213,380,600
9	Total Uninsured Charges	\$10,633,998	\$7,769,616	\$14,460,546
10	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>1.13</b>	<b>1.08</b>	<b>1.01</b>
11	Total Medicare Payments	\$84,432,027	\$87,103,406	\$85,079,847
12	Total Medicare Charges	\$185,574,920	\$202,962,614	\$223,692,067
13	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.65</b>	<b>0.67</b>	<b>0.77</b>
14	Total Medicaid Payments	\$25,333,357	\$32,406,942	\$38,705,516
15	Total Medicaid Charges	\$96,241,350	\$121,507,570	\$133,751,430
16	<b><u>Uncompensated Care Cost</u></b>	<b>\$5,210,770</b>	<b>\$3,267,541</b>	<b>\$4,104,368</b>
17	Charity Care	\$1,043,954	\$629,356	\$384,059
18	Bad Debts	\$11,904,617	\$7,589,833	\$10,501,359
19	Total Uncompensated Care	\$12,948,571	\$8,219,189	\$10,885,418
20	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.6%</b>	<b>1.6%</b>	<b>1.9%</b>
21	Total Operating Expenses	\$196,985,263	\$205,686,874	\$218,384,632
<b>E. <u>Liquidity Measures Summary</u></b>				
1	<b><u>Current Ratio</u></b>	<b>1.75</b>	<b>1.54</b>	<b>1.58</b>
2	Total Current Assets	\$56,533,835	\$59,842,614	\$60,402,000
3	Total Current Liabilities	\$32,281,142	\$38,867,425	\$38,227,000
4	<b><u>Days Cash on Hand</u></b>	<b>44</b>	<b>44</b>	<b>38</b>
5	Cash and Cash Equivalents	\$22,941,812	\$23,202,053	\$21,808,000
6	Short Term Investments	35,207	497,349	38,000
7	Total Cash and Short Term Investments	\$22,977,019	\$23,699,402	\$21,846,000
8	Total Operating Expenses	\$196,985,263	\$205,686,874	\$218,384,632
9	Depreciation Expense	\$7,293,834	\$7,469,946	\$8,637,599
10	Operating Expenses less Depreciation Expense	\$189,691,429	\$198,216,928	\$209,747,033
11	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>29.37</b>	<b>28.42</b>	<b>40.07</b>

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
12	Net Patient Accounts Receivable	\$ 21,905,974	\$ 25,440,911	\$ 31,789,000
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$5,935,477	\$9,296,916	\$7,007,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 15,970,497	\$ 16,143,995	\$ 24,782,000
16	Total Net Patient Revenue	\$198,455,064	\$ 207,355,344	\$ 225,742,944
17	<b>Average Payment Period</b>	<b>62.11</b>	<b>71.57</b>	<b>66.52</b>
18	Total Current Liabilities	\$32,281,142	\$38,867,425	\$38,227,000
19	Total Operating Expenses	\$196,985,263	\$205,686,874	\$218,384,632
20	Depreciation Expense	\$7,293,834	\$7,469,946	\$8,637,599
21	Total Operating Expenses less Depreciation Expense	\$189,691,429	\$198,216,928	\$209,747,033
<b>F. Solvency Measures Summary</b>				
1	<b>Equity Financing Ratio</b>	<b>14.8</b>	<b>8.4</b>	<b>10.5</b>
2	Total Net Assets	\$23,714,139	\$13,626,171	\$17,924,000
3	Total Assets	\$159,811,827	\$163,115,671	\$170,223,000
4	<b>Cash Flow to Total Debt Ratio</b>	<b>36.4</b>	<b>21.3</b>	<b>39.7</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$13,626,779	\$5,758,226	\$15,035,927
6	Depreciation Expense	\$7,293,834	\$7,469,946	\$8,637,599
7	Excess of Revenues Over Expenses and Depreciation Expense	\$20,920,613	\$13,228,172	\$23,673,526
8	Total Current Liabilities	\$32,281,142	\$38,867,425	\$38,227,000
9	Total Long Term Debt	\$25,252,415	\$23,117,083	\$21,341,000
10	Total Current Liabilities and Total Long Term Debt	\$57,533,557	\$61,984,508	\$59,568,000
11	<b>Long Term Debt to Capitalization Ratio</b>	<b>51.6</b>	<b>62.9</b>	<b>54.4</b>
12	Total Long Term Debt	\$25,252,415	\$23,117,083	\$21,341,000
13	Total Net Assets	\$23,714,139	\$13,626,171	\$17,924,000
14	Total Long Term Debt and Total Net Assets	\$48,966,554	\$36,743,254	\$39,265,000
15	<b>Debt Service Coverage Ratio</b>	<b>8.0</b>	<b>3.3</b>	<b>6.4</b>
16	Excess Revenues over Expenses	\$13,626,779	\$5,758,226	\$15,035,927
17	Interest Expense	\$1,719,650	\$1,198,337	\$1,616,544
18	Depreciation and Amortization Expense	\$7,293,834	\$7,469,946	\$8,637,599

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
19	Principal Payments	\$1,121,000	\$3,128,000	\$2,310,000
<b>G. Other Financial Ratios</b>				
20	<b>Average Age of Plant</b>	<b>14.8</b>	<b>15.3</b>	<b>12.9</b>
21	Accumulated Depreciation	\$108,161,901	\$113,942,043	\$111,555,000
22	Depreciation and Amortization Expense	\$7,293,834	\$7,469,946	\$8,637,599
<b>H. Utilization Measures Summary</b>				
1	Patient Days	52,607	55,915	51,556
2	Discharges	12,208	12,534	12,078
3	ALOS	4.3	4.5	4.3
4	Staffed Beds	181	179	182
5	Available Beds	-	181	182
6	Licensed Beds	379	379	379
6	Occupancy of Staffed Beds	79.6%	85.6%	77.6%
7	Occupancy of Available Beds	79.6%	84.6%	77.6%
8	Full Time Equivalent Employees	1,198.7	1,237.9	1,355.2
<b>I. Hospital Gross Revenue Payer Mix Percentage</b>				
1	Non-Government Gross Revenue Payer Mix Percentage	36.5%	34.6%	34.8%
2	Medicare Gross Revenue Payer Mix Percentage	38.6%	39.8%	39.1%
3	Medicaid Gross Revenue Payer Mix Percentage	20.0%	23.8%	23.4%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	2.5%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.2%	1.5%	2.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$175,693,095	\$176,417,205	\$198,920,054
9	Medicare Gross Revenue (Charges)	\$185,574,920	\$202,962,614	\$223,692,067
10	Medicaid Gross Revenue (Charges)	\$96,241,350	\$121,507,570	\$133,751,430
11	Other Medical Assistance Gross Revenue (Charges)	\$11,799,742	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$10,633,998	\$7,769,616	\$14,460,546
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,076,701	\$913,821	\$793,912
14	Total Gross Revenue (Charges)	\$481,019,806	\$509,570,826	\$571,618,009
<b>J. Hospital Net Revenue Payer Mix Percentage</b>				
1	Non-Government Net Revenue Payer Mix Percentage	38.7%	38.1%	40.6%

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
2	Medicare Net Revenue Payer Mix Percentage	46.1%	44.9%	40.6%
3	Medicaid Net Revenue Payer Mix Percentage	13.8%	16.7%	18.5%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.1%	0.1%	0.2%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$70,870,190	\$73,805,155	\$84,966,404
9	Medicare Net Revenue (Payments)	\$84,432,027	\$87,103,406	\$85,079,847
10	Medicaid Net Revenue (Payments)	\$25,333,357	\$32,406,942	\$38,705,516
11	Other Medical Assistance Net Revenue (Payments)	\$1,768,086	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$249,027	\$265,367	\$520,059
13	CHAMPUS / TRICARE Net Revenue Payments)	\$332,866	\$261,375	\$210,562
14	Total Net Revenue (Payments)	\$182,985,553	\$193,842,245	\$209,482,388
<b>K.</b>	<b>Discharges</b>			
1	Non-Government (Including Self Pay / Uninsured)	4,007	3,735	3,627
2	Medicare	5,130	5,576	5,198
3	Medical Assistance	3,023	3,197	3,231
4	Medicaid	2,687	3,197	3,231
5	Other Medical Assistance	336	-	-
6	CHAMPUS / TRICARE	48	26	22
7	Uninsured (Included In Non-Government)	184	128	170
8	Total	12,208	12,534	12,078
<b>L.</b>	<b>Case Mix Index</b>			
1	Non-Government (Including Self Pay / Uninsured)	1.193550	1.202440	1.217200
2	Medicare	1.535060	1.512600	1.500800
3	Medical Assistance	0.988114	1.044100	1.006400
4	Medicaid	0.973840	1.044100	1.006400
5	Other Medical Assistance	1.102270	0.000000	0.000000
6	CHAMPUS / TRICARE	0.682270	0.861900	0.638000
7	Uninsured (Included In Non-Government)	1.038350	1.046900	1.013900
8	Total Case Mix Index	1.284176	1.299327	1.281806
<b>M.</b>	<b>Emergency Department Visits</b>			
1	Emergency Room - Treated and Admitted	7,441	8,191	7,851
2	Emergency Room - Treated and Discharged	60,527	61,021	62,968
3	Total Emergency Room Visits	67,968	69,212	70,819

**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2012**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$868,929	\$1,638,009	\$769,080	89%
2	Inpatient Payments	\$391,854	\$761,129	\$369,275	94%
3	Outpatient Charges	\$330,708	\$1,279,582	\$948,874	287%
4	Outpatient Payments	\$129,344	\$464,701	\$335,357	259%
5	Discharges	28	50	22	79%
6	Patient Days	105	254	149	142%
7	Outpatient Visits (Excludes ED Visits)	405	786	381	94%
8	Emergency Department Outpatient Visits	36	96	60	167%
9	Emergency Department Inpatient Admissions	24	25	1	4%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,199,637</b>	<b>\$2,917,591</b>	<b>\$1,717,954</b>	<b>143%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$521,198</b>	<b>\$1,225,830</b>	<b>\$704,632</b>	<b>135%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$5,376,081	\$5,866,202	\$490,121	9%
2	Inpatient Payments	\$2,510,175	\$2,231,040	(\$279,135)	-11%
3	Outpatient Charges	\$2,566,510	\$4,886,754	\$2,320,244	90%
4	Outpatient Payments	\$679,920	\$1,295,600	\$615,680	91%
5	Discharges	154	212	58	38%
6	Patient Days	865	935	70	8%
7	Outpatient Visits (Excludes ED Visits)	2,445	3,265	820	34%
8	Emergency Department Outpatient Visits	215	300	85	40%
9	Emergency Department Inpatient Admissions	120	119	(1)	-1%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,942,591</b>	<b>\$10,752,956</b>	<b>\$2,810,365</b>	<b>35%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,190,095</b>	<b>\$3,526,640</b>	<b>\$336,545</b>	<b>11%</b>

**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2012**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$7,101,046	\$7,715,448	\$614,402	9%
2	Inpatient Payments	\$3,698,404	\$3,248,257	(\$450,147)	-12%
3	Outpatient Charges	\$3,677,042	\$6,675,401	\$2,998,359	82%
4	Outpatient Payments	\$914,424	\$1,604,103	\$689,679	75%
5	Discharges	298	327	29	10%
6	Patient Days	1,637	1,608	(29)	-2%
7	Outpatient Visits (Excludes ED Visits)	3,597	4,733	1,136	32%
8	Emergency Department Outpatient Visits	340	418	78	23%
9	Emergency Department Inpatient Admissions	265	217	(48)	-18%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$10,778,088</b>	<b>\$14,390,849</b>	<b>\$3,612,761</b>	<b>34%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$4,612,828</b>	<b>\$4,852,360</b>	<b>\$239,532</b>	<b>5%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$1,255,820	\$716,935	(\$538,885)	-43%
2	Inpatient Payments	\$584,695	\$240,139	(\$344,556)	-59%
3	Outpatient Charges	\$760,297	\$253,216	(\$507,081)	-67%
4	Outpatient Payments	\$194,395	\$42,901	(\$151,494)	-78%
5	Discharges	114	24	(90)	-79%
6	Patient Days	783	134	(649)	-83%
7	Outpatient Visits (Excludes ED Visits)	651	141	(510)	-78%
8	Emergency Department Outpatient Visits	80	68	(12)	-15%
9	Emergency Department Inpatient Admissions	33	56	23	70%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,016,117</b>	<b>\$970,151</b>	<b>(\$1,045,966)</b>	<b>-52%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$779,090</b>	<b>\$283,040</b>	<b>(\$496,050)</b>	<b>-64%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$2,994,670	\$2,512,185	(\$482,485)	-16%
2	Inpatient Payments	\$1,475,752	\$1,121,182	(\$354,570)	-24%
3	Outpatient Charges	\$1,625,755	\$1,385,767	(\$239,988)	-15%
4	Outpatient Payments	\$290,079	\$232,839	(\$57,240)	-20%
5	Discharges	124	79	(45)	-36%
6	Patient Days	640	497	(143)	-22%
7	Outpatient Visits (Excludes ED Visits)	1,695	1,374	(321)	-19%
8	Emergency Department Outpatient Visits	192	179	(13)	-7%
9	Emergency Department Inpatient Admissions	108	54	(54)	-50%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$4,620,425</b>	<b>\$3,897,952</b>	<b>(\$722,473)</b>	<b>-16%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,765,831</b>	<b>\$1,354,021</b>	<b>(\$411,810)</b>	<b>-23%</b>



**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2012**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$3,343,299	\$2,861,309	(\$481,990)	-14%
2	Inpatient Payments	\$1,824,307	\$1,188,770	(\$635,537)	-35%
3	Outpatient Charges	\$1,979,765	\$1,736,410	(\$243,355)	-12%
4	Outpatient Payments	\$445,888	\$379,729	(\$66,159)	-15%
5	Discharges	78	113	35	45%
6	Patient Days	328	463	135	41%
7	Outpatient Visits (Excludes ED Visits)	1,816	1,112	(704)	-39%
8	Emergency Department Outpatient Visits	247	197	(50)	-20%
9	Emergency Department Inpatient Admissions	122	31	(91)	-75%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$5,323,064</b>	<b>\$4,597,719</b>	<b>(\$725,345)</b>	<b>-14%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,270,195</b>	<b>\$1,568,499</b>	<b>(\$701,696)</b>	<b>-31%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$1,622,261	\$3,641,301	\$2,019,040	124%
2	Inpatient Payments	\$891,723	\$1,533,316	\$641,593	72%
3	Outpatient Charges	\$1,577,964	\$2,977,583	\$1,399,619	89%
4	Outpatient Payments	\$339,871	\$560,834	\$220,963	65%
5	Discharges	79	143	64	81%
6	Patient Days	416	798	382	92%
7	Outpatient Visits (Excludes ED Visits)	1,036	1,454	418	40%
8	Emergency Department Outpatient Visits	351	543	192	55%
9	Emergency Department Inpatient Admissions	77	112	35	45%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$3,200,225</b>	<b>\$6,618,884</b>	<b>\$3,418,659</b>	<b>107%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,231,594</b>	<b>\$2,094,150</b>	<b>\$862,556</b>	<b>70%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$1,164,457	\$1,859,559	\$695,102	60%
2	Inpatient Payments	\$562,565	\$745,250	\$182,685	32%
3	Outpatient Charges	\$677,332	\$1,473,561	\$796,229	118%
4	Outpatient Payments	\$177,670	\$346,841	\$169,171	95%
5	Discharges	48	63	15	31%
6	Patient Days	93	356	263	283%
7	Outpatient Visits (Excludes ED Visits)	719	910	191	27%
8	Emergency Department Outpatient Visits	62	109	47	76%
9	Emergency Department Inpatient Admissions	42	25	(17)	-40%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,841,789</b>	<b>\$3,333,120</b>	<b>\$1,491,331</b>	<b>81%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$740,235</b>	<b>\$1,092,091</b>	<b>\$351,856</b>	<b>48%</b>

**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
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**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J. HUMANA</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2012**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$23,726,563</b>	<b>\$26,810,948</b>	<b>\$3,084,385</b>	<b>13%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$11,939,475</b>	<b>\$11,069,083</b>	<b>(\$870,392)</b>	<b>-7%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$13,195,373</b>	<b>\$20,668,274</b>	<b>\$7,472,901</b>	<b>57%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$3,171,591</b>	<b>\$4,927,548</b>	<b>\$1,755,957</b>	<b>55%</b>
	<b>TOTAL DISCHARGES</b>	<b>923</b>	<b>1,011</b>	<b>88</b>	<b>10%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>4,867</b>	<b>5,045</b>	<b>178</b>	<b>4%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>12,364</b>	<b>13,775</b>	<b>1,411</b>	<b>11%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>1,523</b>	<b>1,910</b>	<b>387</b>	<b>25%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>791</b>	<b>639</b>	<b>(152)</b>	<b>-19%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$36,921,936</b>	<b>\$47,479,222</b>	<b>\$10,557,286</b>	<b>29%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$15,111,066</b>	<b>\$15,996,631</b>	<b>\$885,565</b>	<b>6%</b>

**SAINT MARY'S HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2012  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$6,556,459	\$1,806,993	(\$4,749,466)	-72%
2	Inpatient Payments	\$2,870,374	\$759,188	(\$2,111,186)	-74%
3	Outpatient Charges	\$25,410,237	\$6,373,929	(\$19,036,308)	-75%
4	Outpatient Payments	\$4,985,517	\$1,244,030	(\$3,741,487)	-75%
5	Discharges	788	139	(649)	-82%
6	Patient Days	2,238	488	(1,750)	-78%
7	Outpatient Visits (Excludes ED Visits)	9,653	2,302	(7,351)	-76%
8	Emergency Department Outpatient Visits	12,690	3,093	(9,597)	-76%
9	Emergency Department Inpatient Admissions	179	51	(128)	-72%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$31,966,696</b>	<b>\$8,180,922</b>	<b>(\$23,785,774)</b>	<b>-74%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$7,855,891</b>	<b>\$2,003,218</b>	<b>(\$5,852,673)</b>	<b>-75%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**SAINT MARY'S HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2012**  
**REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D.</b>	<b>OTHER MEDICAID MANAGED CARE</b>				
1	Inpatient Charges	\$2,031,077	\$451,546	(\$1,579,531)	-78%
2	Inpatient Payments	\$863,488	\$190,582	(\$672,906)	-78%
3	Outpatient Charges	\$5,055,215	\$1,551,510	(\$3,503,705)	-69%
4	Outpatient Payments	\$1,014,026	\$305,963	(\$708,063)	-70%
5	Discharges	255	48	(207)	-81%
6	Patient Days	868	160	(708)	-82%
7	Outpatient Visits (Excludes ED Visits)	1,851	528	(1,323)	-71%
8	Emergency Department Outpatient Visits	2,444	674	(1,770)	-72%
9	Emergency Department Inpatient Admissions	100	22	(78)	-78%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,086,292</b>	<b>\$2,003,056</b>	<b>(\$5,083,236)</b>	<b>-72%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,877,514</b>	<b>\$496,545</b>	<b>(\$1,380,969)</b>	<b>-74%</b>
<b>E.</b>	<b>WELLCARE OF CONNECTICUT</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F.</b>	<b>FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**SAINT MARY'S HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2012  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$4,930,293	\$1,184,184	(\$3,746,109)	-76%
2	Inpatient Payments	\$1,813,351	\$328,463	(\$1,484,888)	-82%
3	Outpatient Charges	\$11,352,618	\$3,013,540	(\$8,339,078)	-73%
4	Outpatient Payments	\$2,182,368	\$645,345	(\$1,537,023)	-70%
5	Discharges	433	82	(351)	-81%
6	Patient Days	1,403	203	(1,200)	-86%
7	Outpatient Visits (Excludes ED Visits)	4,911	1,227	(3,684)	-75%
8	Emergency Department Outpatient Visits	4,906	1,321	(3,585)	-73%
9	Emergency Department Inpatient Admissions	118	24	(94)	-80%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$16,282,911</b>	<b>\$4,197,724</b>	<b>(\$12,085,187)</b>	<b>-74%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,995,719</b>	<b>\$973,808</b>	<b>(\$3,021,911)</b>	<b>-76%</b>
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$13,517,829</b>	<b>\$3,442,723</b>	<b>(\$10,075,106)</b>	<b>-75%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$5,547,213</b>	<b>\$1,278,233</b>	<b>(\$4,268,980)</b>	<b>-77%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$41,818,070</b>	<b>\$10,938,979</b>	<b>(\$30,879,091)</b>	<b>-74%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$8,181,911</b>	<b>\$2,195,338</b>	<b>(\$5,986,573)</b>	<b>-73%</b>
	<b>TOTAL DISCHARGES</b>	<b>1,476</b>	<b>269</b>	<b>(1,207)</b>	<b>-82%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>4,509</b>	<b>851</b>	<b>(3,658)</b>	<b>-81%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>16,415</b>	<b>4,057</b>	<b>(12,358)</b>	<b>-75%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>20,040</b>	<b>5,088</b>	<b>(14,952)</b>	<b>-75%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>397</b>	<b>97</b>	<b>(300)</b>	<b>-76%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$55,335,899</b>	<b>\$14,381,702</b>	<b>(\$40,954,197)</b>	<b>-74%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$13,729,124</b>	<b>\$3,473,571</b>	<b>(\$10,255,553)</b>	<b>-75%</b>

**SAINT MARY'S HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2012  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

SAINT MARY'S HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$25,568,000	\$23,689,000	(\$1,879,000)	-7%
2	Short Term Investments	\$497,000	\$38,000	(\$459,000)	-92%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$28,879,000	\$34,085,000	\$5,206,000	18%
4	Current Assets Whose Use is Limited for Current Liabilities	\$6,428,000	\$6,779,000	\$351,000	5%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$2,561,706	\$2,616,365	\$54,659	2%
8	Prepaid Expenses	\$1,142,417	\$1,331,305	\$188,888	17%
9	Other Current Assets	\$2,403,877	\$865,330	(\$1,538,547)	-64%
	<b>Total Current Assets</b>	<b>\$67,480,000</b>	<b>\$69,404,000</b>	<b>\$1,924,000</b>	<b>3%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$12,673,000	\$14,299,000	\$1,626,000	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$25,834,000	\$27,396,000	\$1,562,000	6%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$38,507,000</b>	<b>\$41,695,000</b>	<b>\$3,188,000</b>	<b>8%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$16,163,000	\$19,467,000	\$3,304,000	20%
7	Other Noncurrent Assets	\$10,421,000	\$10,791,000	\$370,000	4%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$178,374,000	\$176,784,000	(\$1,590,000)	-1%
2	Less: Accumulated Depreciation	\$120,573,000	\$118,434,000	(\$2,139,000)	(\$0)
	<b>Property, Plant and Equipment, Net</b>	<b>\$57,801,000</b>	<b>\$58,350,000</b>	<b>\$549,000</b>	<b>1%</b>
3	Construction in Progress	\$0	\$0	\$0	0%
	<b>Total Net Fixed Assets</b>	<b>\$57,801,000</b>	<b>\$58,350,000</b>	<b>\$549,000</b>	<b>1%</b>
	<b>Total Assets</b>	<b>\$190,372,000</b>	<b>\$199,707,000</b>	<b>\$9,335,000</b>	<b>5%</b>



SAINT MARY'S HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. <b><u>LIABILITIES AND NET ASSETS</u></b>					
A. <b><u>Current Liabilities:</u></b>					
1	Accounts Payable and Accrued Expenses	\$32,246,000	\$17,828,000	(\$14,418,000)	-45%
2	Salaries, Wages and Payroll Taxes	\$5,260,000	\$5,819,000	\$559,000	11%
3	Due To Third Party Payers	\$7,100,000	\$7,007,000	(\$93,000)	-1%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$2,655,000	\$2,238,000	(\$417,000)	-16%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$15,626,000	\$15,626,000	0%
	<b>Total Current Liabilities</b>	<b>\$47,261,000</b>	<b>\$48,518,000</b>	<b>\$1,257,000</b>	<b>3%</b>
B. <b><u>Long Term Debt:</u></b>					
1	Bonds Payable (Net of Current Portion)	\$24,165,000	\$22,302,000	(\$1,863,000)	-8%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$24,165,000</b>	<b>\$22,302,000</b>	<b>(\$1,863,000)</b>	<b>-8%</b>
3	Accrued Pension Liability	\$75,051,000	\$79,738,000	\$4,687,000	6%
4	Other Long Term Liabilities	\$29,324,000	\$28,612,000	(\$712,000)	-2%
	<b>Total Long Term Liabilities</b>	<b>\$128,540,000</b>	<b>\$130,652,000</b>	<b>\$2,112,000</b>	<b>2%</b>
5	Interest in Net Assets of Affiliates or Joint	\$478,000	\$352,000	(\$126,000)	-26%
C. <b><u>Net Assets:</u></b>					
1	Unrestricted Net Assets or Equity	(\$2,136,000)	\$2,333,000	\$4,469,000	-209%
2	Temporarily Restricted Net Assets	\$2,554,000	\$2,546,000	(\$8,000)	0%
3	Permanently Restricted Net Assets	\$13,675,000	\$15,306,000	\$1,631,000	12%
	<b>Total Net Assets</b>	<b>\$14,093,000</b>	<b>\$20,185,000</b>	<b>\$6,092,000</b>	<b>43%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$190,372,000</b>	<b>\$199,707,000</b>	<b>\$9,335,000</b>	<b>5%</b>

SAINT MARY'S HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$608,295,000	\$650,487,000	\$42,192,000	7%
2	Less: Allowances	\$356,387,000	\$390,531,000	\$34,144,000	10%
3	Less: Charity Care	\$629,000	\$136,000	(\$493,000)	-78%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$251,279,000</b>	<b>\$259,820,000</b>	<b>\$8,541,000</b>	<b>3%</b>
5	Other Operating Revenue	\$7,199,000	\$6,695,000	(\$504,000)	-7%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$258,478,000</b>	<b>\$266,515,000</b>	<b>\$8,037,000</b>	<b>3%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$111,631,000	\$115,924,000	\$4,293,000	4%
2	Fringe Benefits	\$29,004,000	\$31,634,000	\$2,630,000	9%
3	Physicians Fees	\$7,342,000	\$6,077,000	(\$1,265,000)	-17%
4	Supplies and Drugs	\$31,904,000	\$37,805,000	\$5,901,000	18%
5	Depreciation and Amortization	\$8,977,000	\$9,549,000	\$572,000	6%
6	Bad Debts	\$9,606,000	\$12,750,000	\$3,144,000	33%
7	Interest	\$1,345,000	\$1,744,000	\$399,000	30%
8	Malpractice	\$5,374,420	\$5,370,000	(\$4,420)	0%
9	Other Operating Expenses	\$55,615,580	\$41,127,000	(\$14,488,580)	-26%
	<b>Total Operating Expenses</b>	<b>\$260,799,000</b>	<b>\$261,980,000</b>	<b>\$1,181,000</b>	<b>0%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$2,321,000)</b>	<b>\$4,535,000</b>	<b>\$6,856,000</b>	<b>-295%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$979,000	\$2,112,000	\$1,133,000	116%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$426,000)	\$508,000	\$934,000	-219%
	<b>Total Non-Operating Revenue</b>	<b>\$553,000</b>	<b>\$2,620,000</b>	<b>\$2,067,000</b>	<b>374%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>(\$1,768,000)</b>	<b>\$7,155,000</b>	<b>\$8,923,000</b>	<b>-505%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>(\$1,768,000)</b>	<b>\$7,155,000</b>	<b>\$8,923,000</b>	<b>-505%</b>

SAINT MARY'S HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$243,847,000	\$251,279,000	\$259,820,000
2	Other Operating Revenue	7,572,000	7,199,000	6,695,000
3	Total Operating Revenue	\$251,419,000	\$258,478,000	\$266,515,000
4	Total Operating Expenses	247,317,000	260,799,000	261,980,000
5	Income/(Loss) From Operations	\$4,102,000	(\$2,321,000)	\$4,535,000
6	Total Non-Operating Revenue	2,435,000	553,000	2,620,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$6,537,000	(\$1,768,000)	\$7,155,000
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	1.62%	-0.90%	1.69%
2	Parent Corporation Non-Operating Margin	0.96%	0.21%	0.97%
3	Parent Corporation Total Margin	2.58%	-0.68%	2.66%
4	Income/(Loss) From Operations	\$4,102,000	(\$2,321,000)	\$4,535,000
5	Total Operating Revenue	\$251,419,000	\$258,478,000	\$266,515,000
6	Total Non-Operating Revenue	\$2,435,000	\$553,000	\$2,620,000
7	Total Revenue	\$253,854,000	\$259,031,000	\$269,135,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$6,537,000	(\$1,768,000)	\$7,155,000
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$7,737,000	(\$2,136,000)	\$2,333,000
2	Parent Corporation Total Net Assets	\$24,697,000	\$14,093,000	\$20,185,000
3	Parent Corporation Change in Total Net Assets	\$11,554,000	(\$10,604,000)	\$6,092,000
4	Parent Corporation Change in Total Net Assets %	187.9%	-42.9%	43.2%

SAINT MARY'S HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.66	1.43	1.43
2	Total Current Assets	\$63,566,000	\$67,480,000	\$69,404,000
3	Total Current Liabilities	\$38,348,000	\$47,261,000	\$48,518,000
4	<u>Days Cash on Hand</u>	41	38	34
5	Cash and Cash Equivalents	\$26,358,000	\$25,568,000	\$23,689,000
6	Short Term Investments	1,182,000	497,000	38,000
7	Total Cash and Short Term Investments	\$27,540,000	\$26,065,000	\$23,727,000
8	Total Operating Expenses	\$247,317,000	\$260,799,000	\$261,980,000
9	Depreciation Expense	\$0	\$8,977,000	\$9,549,000
10	Operating Expenses less Depreciation Expense	\$247,317,000	\$251,822,000	\$252,431,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	31	32	38
12	Net Patient Accounts Receivable	\$ 26,752,000	\$ 28,879,000	\$ 34,085,000
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$5,935,000	\$7,100,000	\$7,007,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 20,817,000	\$ 21,779,000	\$ 27,078,000
16	Total Net Patient Revenue	\$243,847,000	\$251,279,000	\$259,820,000
17	<u>Average Payment Period</u>	57	69	70
18	Total Current Liabilities	\$38,348,000	\$47,261,000	\$48,518,000
19	Total Operating Expenses	\$247,317,000	\$260,799,000	\$261,980,000
20	Depreciation Expense	\$0	\$8,977,000	\$9,549,000
21	Total Operating Expenses less Depreciation Expense	\$247,317,000	\$251,822,000	\$252,431,000

SAINT MARY'S HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	13.2	7.4	10.1
2	Total Net Assets	\$24,697,000	\$14,093,000	\$20,185,000
3	Total Assets	\$186,628,000	\$190,372,000	\$199,707,000
4	<u>Cash Flow to Total Debt Ratio</u>	10.0	10.1	23.6
5	Excess/(Deficiency) of Revenues Over Expenses	\$6,537,000	(\$1,768,000)	\$7,155,000
6	Depreciation Expense	\$0	\$8,977,000	\$9,549,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$6,537,000	\$7,209,000	\$16,704,000
8	Total Current Liabilities	\$38,348,000	\$47,261,000	\$48,518,000
9	Total Long Term Debt	\$26,789,000	\$24,165,000	\$22,302,000
10	Total Current Liabilities and Total Long Term Debt	\$65,137,000	\$71,426,000	\$70,820,000
11	<u>Long Term Debt to Capitalization Ratio</u>	52.0	63.2	52.5
12	Total Long Term Debt	\$26,789,000	\$24,165,000	\$22,302,000
13	Total Net Assets	\$24,697,000	\$14,093,000	\$20,185,000
14	Total Long Term Debt and Total Net Assets	\$51,486,000	\$38,258,000	\$42,487,000

		SAINT MARY'S HOSPITAL						
		TWELVE MONTHS ACTUAL FILING						
		FISCAL YEAR 2012						
		REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT						
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	38,186	9,129	9,583	123	123	85.1%	85.1%
2	ICU/CCU (Excludes Neonatal ICU)	3,209	332	0	16	16	54.9%	54.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	3,994	625	622	12	12	91.2%	91.2%
	<b>TOTAL PSYCHIATRIC</b>	<b>3,994</b>	<b>625</b>	<b>622</b>	<b>12</b>	<b>12</b>	<b>91.2%</b>	<b>91.2%</b>
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,755	1,021	1,062	16	16	47.2%	47.2%
7	Newborn	2,022	864	930	7	7	79.1%	79.1%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	1,390	439	212	8	8	47.6%	47.6%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>49,534</b>	<b>11,214</b>	<b>11,479</b>	<b>175</b>	<b>175</b>	<b>77.5%</b>	<b>77.5%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>51,556</b>	<b>12,078</b>	<b>12,409</b>	<b>182</b>	<b>182</b>	<b>77.6%</b>	<b>77.6%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>51,556</b>	<b>12,078</b>	<b>12,409</b>	<b>182</b>	<b>182</b>	<b>77.6%</b>	<b>77.6%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>55,915</b>	<b>12,534</b>	<b>13,154</b>	<b>179</b>	<b>181</b>	<b>85.6%</b>	<b>84.6%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-4,359</b>	<b>-456</b>	<b>-745</b>	<b>3</b>	<b>1</b>	<b>-8.0%</b>	<b>-7.0%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-8%</b>	<b>-4%</b>	<b>-6%</b>	<b>2%</b>	<b>1%</b>	<b>-9%</b>	<b>-8%</b>
	Total Licensed Beds and Bassinets	379						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A.</b>	<b>CT Scans (A)</b>				
1	Inpatient Scans	5,720	5,452	-268	-5%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,095	4,035	-60	-1%
3	Emergency Department Scans	8,625	8,828	203	2%
4	Other Non-Hospital Providers' Scans (A)	3,505	3,316	-189	-5%
	<b>Total CT Scans</b>	<b>21,945</b>	<b>21,631</b>	<b>-314</b>	<b>-1%</b>
<b>B.</b>	<b>MRI Scans (A)</b>				
1	Inpatient Scans	1,397	1,179	-218	-16%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,960	2,262	302	15%
3	Emergency Department Scans	142	135	-7	-5%
4	Other Non-Hospital Providers' Scans (A)	11,082	10,565	-517	-5%
	<b>Total MRI Scans</b>	<b>14,581</b>	<b>14,141</b>	<b>-440</b>	<b>-3%</b>
<b>C.</b>	<b>PET Scans (A)</b>				
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	711	673	-38	-5%
	<b>Total PET Scans</b>	<b>711</b>	<b>673</b>	<b>-38</b>	<b>-5%</b>
<b>D.</b>	<b>PET/CT Scans (A)</b>				
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
<b>E.</b>	<b>Linear Accelerator Procedures</b>				
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	10,955	10,993	38	0%
	<b>Total Linear Accelerator Procedures</b>	<b>10,955</b>	<b>10,993</b>	<b>38</b>	<b>0%</b>
<b>F.</b>	<b>Cardiac Catheterization Procedures</b>				
1	Inpatient Procedures	581	646	65	11%
2	Outpatient Procedures	323	369	46	14%
	<b>Total Cardiac Catheterization Procedures</b>	<b>904</b>	<b>1,015</b>	<b>111</b>	<b>12%</b>
<b>G.</b>	<b>Cardiac Angioplasty Procedures</b>				
1	Primary Procedures	363	415	52	14%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>363</b>	<b>415</b>	<b>52</b>	<b>14%</b>
<b>H.</b>	<b>Electrophysiology Studies</b>				
1	Inpatient Studies	118	113	-5	-4%
2	Outpatient Studies	90	111	21	23%
	<b>Total Electrophysiology Studies</b>	<b>208</b>	<b>224</b>	<b>16</b>	<b>8%</b>
<b>I.</b>	<b>Surgical Procedures</b>				
1	Inpatient Surgical Procedures	8,426	9,210	784	9%
2	Outpatient Surgical Procedures	7,703	17,984	10,281	133%
	<b>Total Surgical Procedures</b>	<b>16,129</b>	<b>27,194</b>	<b>11,065</b>	<b>69%</b>
<b>J.</b>	<b>Endoscopy Procedures</b>				

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	303	312	9	3%
2	Outpatient Endoscopy Procedures	438	982	544	124%
	<b>Total Endoscopy Procedures</b>	<b>741</b>	<b>1,294</b>	<b>553</b>	<b>75%</b>
<b>K.</b>	<b>Hospital Emergency Room Visits</b>				
1	Emergency Room Visits: Treated and Admitted	8,191	7,851	-340	-4%
2	Emergency Room Visits: Treated and Discharged	61,021	62,968	1,947	3%
	<b>Total Emergency Room Visits</b>	<b>69,212</b>	<b>70,819</b>	<b>1,607</b>	<b>2%</b>
<b>L.</b>	<b>Hospital Clinic Visits</b>				
1	Substance Abuse Treatment Clinic Visits	191	204	13	7%
2	Dental Clinic Visits	6,006	5,204	-802	-13%
3	Psychiatric Clinic Visits	9,578	11,794	2,216	23%
4	Medical Clinic Visits	50,130	43,317	-6,813	-14%
5	Specialty Clinic Visits	0	0	0	0%
	<b>Total Hospital Clinic Visits</b>	<b>65,905</b>	<b>60,519</b>	<b>-5,386</b>	<b>-8%</b>
<b>M.</b>	<b>Other Hospital Outpatient Visits</b>				
1	Rehabilitation (PT/OT/ST)	12,452	14,734	2,282	18%
2	Cardiology	2,565	2,901	336	13%
3	Chemotherapy	112	150	38	34%
4	Gastroenterology	511	4,714	4,203	823%
5	Other Outpatient Visits	147,786	150,330	2,544	2%
	<b>Total Other Hospital Outpatient Visits</b>	<b>163,426</b>	<b>172,829</b>	<b>9,403</b>	<b>6%</b>
<b>N.</b>	<b>Hospital Full Time Equivalent Employees</b>				
1	Total Nursing FTEs	339.7	361.6	21.9	6%
2	Total Physician FTEs	52.5	53.6	1.1	2%
3	Total Non-Nursing and Non-Physician FTEs	845.7	940.0	94.3	11%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>1,237.9</b>	<b>1,355.2</b>	<b>117.3</b>	<b>9%</b>



SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>A.</b>	<b><u>Outpatient Surgical Procedures</u></b>				
1	Hospital	5,873	7,479	1,606	27%
2	Naugatuck Valley Surgical Center	1,830	10,505	8,675	474%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>7,703</b>	<b>17,984</b>	<b>10,281</b>	<b>133%</b>
<b>B.</b>	<b><u>Outpatient Endoscopy Procedures</u></b>				
1	Hospital	438	982	544	124%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>438</b>	<b>982</b>	<b>544</b>	<b>124%</b>
<b>C.</b>	<b><u>Outpatient Hospital Emergency Room Visits</u></b>				
1	Hospital	61,021	62,968	1,947	3%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>61,021</b>	<b>62,968</b>	<b>1,947</b>	<b>3%</b>
	<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>				
	<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>				
	<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>				

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>I.</b>	<b><u>DATA BY MAJOR PAYER CATEGORY</u></b>				
<b>A.</b>	<b><u>MEDICARE</u></b>				
	<b><u>MEDICARE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$134,596,737	\$132,497,985	(\$2,098,752)	-2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$71,258,618	\$65,457,999	(\$5,800,619)	-8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	52.94%	49.40%	-3.54%	-7%
4	DISCHARGES	5,576	5,198	(378)	-7%
5	CASE MIX INDEX (CMI)	1.51260	1.50080	(0.01180)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	8,434,25760	7,801,15840	(633,09920)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,448.71	\$8,390.81	(\$57.91)	-1%
8	PATIENT DAYS	29,268	26,064	(3,204)	-11%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,434.69	\$2,511.43	\$76.74	3%
10	AVERAGE LENGTH OF STAY	5.2	5.0	(0.2)	-4%
	<b><u>MEDICARE OUTPATIENT</u></b>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$68,365,877	\$91,194,082	\$22,828,205	33%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,844,788	\$19,621,848	\$3,777,060	24%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.18%	21.52%	-1.66%	-7%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	50.79%	68.83%	18.03%	36%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,832,22416	3,577,61545	745,39129	26%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,594.47	\$5,484.62	(\$109.85)	-2%
	<b><u>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
17	TOTAL ACCRUED CHARGES	\$202,962,614	\$223,692,067	\$20,729,453	10%
18	TOTAL ACCRUED PAYMENTS	\$87,103,406	\$85,079,847	(\$2,023,559)	-2%
19	TOTAL ALLOWANCES	\$115,859,208	\$138,612,220	\$22,753,012	20%

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>B.</b>	<b><u>NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</u></b>				
	<b><u>NON-GOVERNMENT INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$71,960,779	\$70,295,781	(\$1,664,998)	-2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$38,313,551	\$38,013,546	(\$300,005)	-1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	53.24%	54.08%	0.83%	2%
4	DISCHARGES	3,735	3,627	(108)	-3%
5	CASE MIX INDEX (CMI)	1.20244	1.21720	0.01476	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,491.11340	4,414.78440	(76.32900)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,530.97	\$8,610.51	\$79.54	1%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$82.26)	(\$219.71)	(\$137.45)	167%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$369,425)	(\$969,951)	(\$600,526)	163%
10	PATIENT DAYS	13,326	12,720	(606)	-5%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,875.10	\$2,988.49	\$113.39	4%
12	AVERAGE LENGTH OF STAY	3.6	3.5	(0.1)	-2%
	<b><u>NON-GOVERNMENT OUTPATIENT</u></b>				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$112,226,042	\$143,084,819	\$30,858,777	27%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$35,756,971	\$47,472,917	\$11,715,946	33%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.86%	33.18%	1.32%	4%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	155.95%	203.55%	47.59%	31%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,824.89896	7,382.64276	1,557.74380	27%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,138.64	\$6,430.34	\$291.70	5%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$544.17)	(\$945.73)	(\$401.55)	74%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,169,759)	(\$6,981,954)	(\$3,812,195)	120%
	<b><u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u></b>				
21	TOTAL ACCRUED CHARGES	\$184,186,821	\$213,380,600	\$29,193,779	16%
22	TOTAL ACCRUED PAYMENTS	\$74,070,522	\$85,486,463	\$11,415,941	15%
23	TOTAL ALLOWANCES	\$110,116,299	\$127,894,137	\$17,777,838	16%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,539,184)	(\$7,951,905)	(\$4,412,721)	125%
	<b><u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u></b>				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$184,186,821	\$213,380,600	\$29,193,779	16%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$74,070,522	\$85,486,463	\$11,415,941	15%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$110,116,299	\$127,894,137	\$17,777,838	16%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	59.79%	59.94%	0.15%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>C.</b>	<b>UNINSURED</b>				
	<b>UNINSURED INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$1,346,229	\$2,175,963	\$829,734	62%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$26,510	\$95,854	\$69,344	262%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.97%	4.41%	2.44%	124%
4	DISCHARGES	128	170	42	33%
5	CASE MIX INDEX (CMI)	1.04690	1.01390	(0.03300)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	134.00320	172.36300	38.35980	29%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$197.83	\$556.12	\$358.29	181%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,333.14	\$8,054.39	(\$278.75)	-3%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$8,250.88	\$7,834.69	(\$416.19)	-5%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,105,645	\$1,350,410	\$244,766	22%
11	PATIENT DAYS	372	547	175	47%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$71.26	\$175.24	\$103.97	146%
13	AVERAGE LENGTH OF STAY	2.9	3.2	0.3	11%
	<b>UNINSURED OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$6,423,387	\$12,284,583	\$5,861,196	91%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$238,857	\$424,205	\$185,348	78%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	3.72%	3.45%	-0.27%	-7%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	477.14%	564.56%	87.42%	18%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	610.73824	959.74937	349.01112	57%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$391.10	\$442.00	\$50.90	13%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,747.55	\$5,988.35	\$240.80	4%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,203.37	\$5,042.62	(\$160.75)	-3%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,177,899	\$4,839,652	\$1,661,753	52%
	<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$7,769,616	\$14,460,546	\$6,690,930	86%
24	TOTAL ACCRUED PAYMENTS	\$265,367	\$520,059	\$254,692	96%
25	TOTAL ALLOWANCES	\$7,504,249	\$13,940,487	\$6,436,238	86%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,283,543	\$6,190,062	\$1,906,519	45%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>D.</b>	<b><u>STATE OF CONNECTICUT MEDICAID</u></b>				
	<b><u>MEDICAID INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$43,406,294	\$44,498,586	\$1,092,292	3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$17,852,726	\$19,423,333	\$1,570,607	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.13%	43.65%	2.52%	6%
4	DISCHARGES	3,197	3,231	34	1%
5	CASE MIX INDEX (CMI)	1.04410	1.00640	(0.03770)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,337.98770	3,251.67840	(86.30930)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,348.35	\$5,973.33	\$624.98	12%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,182.62	\$2,637.18	(\$545.43)	-17%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,100.36	\$2,417.48	(\$682.88)	-22%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,348,973	\$7,860,866	(\$2,488,106)	-24%
11	PATIENT DAYS	13,247	12,716	(531)	-4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,347.68	\$1,527.47	\$179.79	13%
13	AVERAGE LENGTH OF STAY	4.1	3.9	(0.2)	-5%
	<b><u>MEDICAID OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$78,101,276	\$89,252,844	\$11,151,568	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,554,216	\$19,282,183	\$4,727,967	32%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.64%	21.60%	2.97%	16%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	179.93%	200.57%	20.64%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,752.38649	6,480.56410	728.17761	13%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,530.12	\$2,975.39	\$445.27	18%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$3,608.52	\$3,454.96	(\$153.57)	-4%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,064.35	\$2,509.23	(\$555.12)	-18%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$17,627,327	\$16,261,224	(\$1,366,103)	-8%
	<b><u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$121,507,570	\$133,751,430	\$12,243,860	10%
24	TOTAL ACCRUED PAYMENTS	\$32,406,942	\$38,705,516	\$6,298,574	19%
25	TOTAL ALLOWANCES	\$89,100,628	\$95,045,914	\$5,945,286	7%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$27,976,300	\$24,122,091	(\$3,854,209)	-14%

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LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>E.</b>	<b><u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u></b>				
	<b><u>OTHER MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$8,530.97	\$8,610.51	\$79.54	1%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$8,448.71	\$8,390.81	(\$57.91)	-1%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$6,138.64	\$6,430.34	\$291.70	5%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$5,594.47	\$5,484.62	(\$109.85)	-2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

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LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>F.</b>	<b>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>				
	<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$43,406,294	\$44,498,586	\$1,092,292	3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$17,852,726	\$19,423,333	\$1,570,607	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.13%	43.65%	2.52%	6%
4	DISCHARGES	3,197	3,231	34	1%
5	CASE MIX INDEX (CMI)	1.04410	1.00640	(0.03770)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,337.98770	3,251.67840	(86.30930)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,348.35	\$5,973.33	\$624.98	12%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,182.62	\$2,637.18	(\$545.43)	-17%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,100.36	\$2,417.48	(\$682.88)	-22%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,348,973	\$7,860,866	(\$2,488,106)	-24%
11	PATIENT DAYS	13,247	12,716	(531)	-4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,347.68	\$1,527.47	\$179.79	13%
13	AVERAGE LENGTH OF STAY	4.1	3.9	(0.2)	-5%
	<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$78,101,276	\$89,252,844	\$11,151,568	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,554,216	\$19,282,183	\$4,727,967	32%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.64%	21.60%	2.97%	16%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	179.93%	200.57%	20.64%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,752.38649	6,480.56410	728.17761	13%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,530.12	\$2,975.39	\$445.27	18%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,608.52	\$3,454.96	(\$153.57)	-4%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,064.35	\$2,509.23	(\$555.12)	-18%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$17,627,327	\$16,261,224	(\$1,366,103)	-8%
	<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$121,507,570	\$133,751,430	\$12,243,860	10%
24	TOTAL ACCRUED PAYMENTS	\$32,406,942	\$38,705,516	\$6,298,574	19%
25	TOTAL ALLOWANCES	\$89,100,628	\$95,045,914	\$5,945,286	7%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>G.</b>	<b><u>CHAMPUS / TRICARE</u></b>				
	<b><u>CHAMPUS / TRICARE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$272,321	\$139,608	(\$132,713)	-49%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$99,438	\$52,613	(\$46,825)	-47%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.51%	37.69%	1.17%	3%
4	DISCHARGES	26	22	(4)	-15%
5	CASE MIX INDEX (CMI)	0.86190	0.63800	(0.22390)	-26%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	22.40940	14.03600	(8.37340)	-37%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,437.33	\$3,748.43	(\$688.90)	-16%
8	PATIENT DAYS	74	56	(18)	-24%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,343.76	\$939.52	(\$404.24)	-30%
10	AVERAGE LENGTH OF STAY	2.8	2.5	(0.3)	-11%
	<b><u>CHAMPUS / TRICARE OUTPATIENT</u></b>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$641,500	\$654,304	\$12,804	2%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$161,937	\$157,949	(\$3,988)	-2%
	<b><u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
13	TOTAL ACCRUED CHARGES	\$913,821	\$793,912	(\$119,909)	-13%
14	TOTAL ACCRUED PAYMENTS	\$261,375	\$210,562	(\$50,813)	-19%
15	TOTAL ALLOWANCES	\$652,446	\$583,350	(\$69,096)	-11%
<b>H.</b>	<b><u>OTHER DATA</u></b>				
1	OTHER OPERATING REVENUE	\$7,814,938	\$7,571,760	(\$243,178)	-3%
2	TOTAL OPERATING EXPENSES	\$205,686,874	\$218,384,632	\$12,697,758	6%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	<b><u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u></b>				
4	CHARITY CARE (CHARGES)	\$629,356	\$384,059	(\$245,297)	-39%
5	BAD DEBTS (CHARGES)	\$7,589,833	\$10,501,359	\$2,911,526	38%
6	UNCOMPENSATED CARE (CHARGES)	\$8,219,189	\$10,885,418	\$2,666,229	32%
7	COST OF UNCOMPENSATED CARE	\$2,909,475	\$3,666,916	\$757,441	26%
	<b><u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u></b>				
8	TOTAL ACCRUED CHARGES	\$121,507,570	\$133,751,430	\$12,243,860	10%
9	TOTAL ACCRUED PAYMENTS	\$32,406,942	\$38,705,516	\$6,298,574	19%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$43,011,930	\$45,056,165	\$2,044,236	5%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$10,604,988	\$6,350,649	(\$4,254,338)	-40%



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<b>II.</b>	<b><u>AGGREGATE DATA</u></b>				
<b>A.</b>	<b><u>TOTALS - ALL PAYERS</u></b>				
1	TOTAL INPATIENT CHARGES	\$250,236,131	\$247,431,960	(\$2,804,171)	-1%
2	TOTAL INPATIENT PAYMENTS	\$127,524,333	\$122,947,491	(\$4,576,842)	-4%
3	TOTAL INPATIENT PAYMENTS / CHARGES	50.96%	49.69%	-1.27%	-2%
4	TOTAL DISCHARGES	12,534	12,078	(456)	-4%
5	TOTAL CASE MIX INDEX	1.29933	1.28181	(0.01752)	-1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	16,285,76810	15,481,65720	(804,11090)	-5%
7	TOTAL OUTPATIENT CHARGES	\$259,334,695	\$324,186,049	\$64,851,354	25%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	103.64%	131.02%	27.38%	26%
9	TOTAL OUTPATIENT PAYMENTS	\$66,317,912	\$86,534,897	\$20,216,985	30%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.57%	26.69%	1.12%	4%
11	TOTAL CHARGES	\$509,570,826	\$571,618,009	\$62,047,183	12%
12	TOTAL PAYMENTS	\$193,842,245	\$209,482,388	\$15,640,143	8%
13	TOTAL PAYMENTS / TOTAL CHARGES	38.04%	36.65%	-1.39%	-4%
14	PATIENT DAYS	55,915	51,556	(4,359)	-8%
<b>B.</b>	<b><u>TOTALS - ALL GOVERNMENT PAYERS</u></b>				
1	INPATIENT CHARGES	\$178,275,352	\$177,136,179	(\$1,139,173)	-1%
2	INPATIENT PAYMENTS	\$89,210,782	\$84,933,945	(\$4,276,837)	-5%
3	GOVT. INPATIENT PAYMENTS / CHARGES	50.04%	47.95%	-2.09%	-4%
4	DISCHARGES	8,799	8,451	(348)	-4%
5	CASE MIX INDEX	1.34045	1.30953	(0.03092)	-2%
6	CASE MIX ADJUSTED DISCHARGES	11,794.65470	11,066.87280	(727.78190)	-6%
7	OUTPATIENT CHARGES	\$147,108,653	\$181,101,230	\$33,992,577	23%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	82.52%	102.24%	19.72%	24%
9	OUTPATIENT PAYMENTS	\$30,560,941	\$39,061,980	\$8,501,039	28%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.77%	21.57%	0.79%	4%
11	TOTAL CHARGES	\$325,384,005	\$358,237,409	\$32,853,404	10%
12	TOTAL PAYMENTS	\$119,771,723	\$123,995,925	\$4,224,202	4%
13	TOTAL PAYMENTS / CHARGES	36.81%	34.61%	-2.20%	-6%
14	PATIENT DAYS	42,589	38,836	(3,753)	-9%
15	TOTAL GOVERNMENT DEDUCTIONS	\$205,612,282	\$234,241,484	\$28,629,202	14%
<b>C.</b>	<b><u>AVERAGE LENGTH OF STAY</u></b>				
1	MEDICARE	5.2	5.0	(0.2)	-4%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.5	(0.1)	-2%
3	UNINSURED	2.9	3.2	0.3	11%
4	MEDICAID	4.1	3.9	(0.2)	-5%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	2.8	2.5	(0.3)	-11%
7	TOTAL AVERAGE LENGTH OF STAY	4.5	4.3	(0.2)	-4%

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<b>III.</b>	<b><u>DATA USED IN BASELINE UNDERPAYMENT CALCULATION</u></b>				
1	TOTAL CHARGES	\$509,570,826	\$571,618,009	\$62,047,183	12%
2	TOTAL GOVERNMENT DEDUCTIONS	\$205,612,282	\$234,241,484	\$28,629,202	14%
3	UNCOMPENSATED CARE	\$8,219,189	\$10,885,418	\$2,666,229	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$110,116,299	\$127,894,137	\$17,777,838	16%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,242,323	\$6,038,912	\$796,589	15%
6	TOTAL ADJUSTMENTS	\$329,190,093	\$379,059,951	\$49,869,858	15%
7	TOTAL ACCRUED PAYMENTS	\$180,380,733	\$192,558,058	\$12,177,325	7%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMTS.	\$180,380,733	\$192,558,058	\$12,177,325	7%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3539855969	0.3368649255	(0.0171206714)	-5%
11	COST OF UNCOMPENSATED CARE	\$2,909,475	\$3,666,916	\$757,441	26%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$10,604,988	\$6,350,649	(\$4,254,338)	-40%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$13,514,462	\$10,017,565	(\$3,496,897)	-26%
<b>IV.</b>	<b><u>CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</u></b>				
1	MEDICAID	\$17,627,327	\$16,261,224	(\$1,366,103)	-8%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,283,543	\$6,190,062	\$1,906,519	45%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$21,910,871	\$22,451,287	\$540,416	2%
<b>V.</b>	<b><u>DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</u></b>				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$8,576,435	\$9,490,298	\$913,863	10.66%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$13,512,756	\$16,260,614	\$2,747,858	20.34%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$207,355,000	\$225,742,944	\$18,387,944	8.87%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$509,571,000	\$571,618,009	\$62,047,009	12.18%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$8,219,189	\$10,885,418	\$2,666,229	32.44%

SAINT MARY'S HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
<b>I.</b>	<b>ACCRUED CHARGES AND PAYMENTS</b>			
<b>A.</b>	<b>INPATIENT ACCRUED CHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$71,960,779	\$70,295,781	(\$1,664,998)
2	MEDICARE	\$134,596,737	132,497,985	(\$2,098,752)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$43,406,294	44,498,586	\$1,092,292
4	MEDICAID	\$43,406,294	44,498,586	\$1,092,292
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$272,321	139,608	(\$132,713)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,346,229	2,175,963	\$829,734
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$178,275,352</b>	<b>\$177,136,179</b>	<b>(\$1,139,173)</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$250,236,131</b>	<b>\$247,431,960</b>	<b>(\$2,804,171)</b>
<b>B.</b>	<b>OUTPATIENT ACCRUED CHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$112,226,042	\$143,084,819	\$30,858,777
2	MEDICARE	\$68,365,877	91,194,082	\$22,828,205
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$78,101,276	89,252,844	\$11,151,568
4	MEDICAID	\$78,101,276	89,252,844	\$11,151,568
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$641,500	654,304	\$12,804
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,423,387	12,284,583	\$5,861,196
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$147,108,653</b>	<b>\$181,101,230</b>	<b>\$33,992,577</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$259,334,695</b>	<b>\$324,186,049</b>	<b>\$64,851,354</b>
<b>C.</b>	<b>TOTAL ACCRUED CHARGES</b>			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$184,186,821	\$213,380,600	\$29,193,779
2	TOTAL MEDICARE	\$202,962,614	\$223,692,067	\$20,729,453
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$121,507,570	\$133,751,430	\$12,243,860
4	TOTAL MEDICAID	\$121,507,570	\$133,751,430	\$12,243,860
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$913,821	\$793,912	(\$119,909)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,769,616	\$14,460,546	\$6,690,930
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$325,384,005</b>	<b>\$358,237,409</b>	<b>\$32,853,404</b>
	<b>TOTAL CHARGES</b>	<b>\$509,570,826</b>	<b>\$571,618,009</b>	<b>\$62,047,183</b>
<b>D.</b>	<b>INPATIENT ACCRUED PAYMENTS</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$38,313,551	\$38,013,546	(\$300,005)
2	MEDICARE	\$71,258,618	65,457,999	(\$5,800,619)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$17,852,726	19,423,333	\$1,570,607
4	MEDICAID	\$17,852,726	19,423,333	\$1,570,607
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$99,438	52,613	(\$46,825)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$26,510	95,854	\$69,344
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$89,210,782</b>	<b>\$84,933,945</b>	<b>(\$4,276,837)</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$127,524,333</b>	<b>\$122,947,491</b>	<b>(\$4,576,842)</b>
<b>E.</b>	<b>OUTPATIENT ACCRUED PAYMENTS</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,756,971	\$47,472,917	\$11,715,946
2	MEDICARE	\$15,844,788	19,621,848	\$3,777,060
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,554,216	19,282,183	\$4,727,967
4	MEDICAID	\$14,554,216	19,282,183	\$4,727,967
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$161,937	157,949	(\$3,988)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$238,857	424,205	\$185,348
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$30,560,941</b>	<b>\$39,061,980</b>	<b>\$8,501,039</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$66,317,912</b>	<b>\$86,534,897</b>	<b>\$20,216,985</b>
<b>F.</b>	<b>TOTAL ACCRUED PAYMENTS</b>			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$74,070,522	\$85,486,463	\$11,415,941
2	TOTAL MEDICARE	\$87,103,406	\$85,079,847	(\$2,023,559)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$32,406,942	\$38,705,516	\$6,298,574
4	TOTAL MEDICAID	\$32,406,942	\$38,705,516	\$6,298,574
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$261,375	\$210,562	(\$50,813)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$265,367	\$520,059	\$254,692
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$119,771,723</b>	<b>\$123,995,925</b>	<b>\$4,224,202</b>
	<b>TOTAL PAYMENTS</b>	<b>\$193,842,245</b>	<b>\$209,482,388</b>	<b>\$15,640,143</b>

SAINT MARY'S HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
<b>II.</b>	<b><u>PAYER MIX</u></b>			
<b>A.</b>	<b><u>INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u></b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.12%	12.30%	-1.82%
2	MEDICARE	26.41%	23.18%	-3.23%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.52%	7.78%	-0.73%
4	MEDICAID	8.52%	7.78%	-0.73%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.05%	0.02%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.26%	0.38%	0.12%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>34.99%</b>	<b>30.99%</b>	<b>-4.00%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>49.11%</b>	<b>43.29%</b>	<b>-5.82%</b>
<b>B.</b>	<b><u>OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u></b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	22.02%	25.03%	3.01%
2	MEDICARE	13.42%	15.95%	2.54%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	15.33%	15.61%	0.29%
4	MEDICAID	15.33%	15.61%	0.29%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.13%	0.11%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.26%	2.15%	0.89%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>28.87%</b>	<b>31.68%</b>	<b>2.81%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>50.89%</b>	<b>56.71%</b>	<b>5.82%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C.</b>	<b><u>INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u></b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	19.77%	18.15%	-1.62%
2	MEDICARE	36.76%	31.25%	-5.51%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.21%	9.27%	0.06%
4	MEDICAID	9.21%	9.27%	0.06%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.05%	0.03%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.01%	0.05%	0.03%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>46.02%</b>	<b>40.54%</b>	<b>-5.48%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>65.79%</b>	<b>58.69%</b>	<b>-7.10%</b>
<b>D.</b>	<b><u>OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u></b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.45%	22.66%	4.22%
2	MEDICARE	8.17%	9.37%	1.19%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.51%	9.20%	1.70%
4	MEDICAID	7.51%	9.20%	1.70%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.08%	0.08%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.12%	0.20%	0.08%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>15.77%</b>	<b>18.65%</b>	<b>2.88%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>34.21%</b>	<b>41.31%</b>	<b>7.10%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

SAINT MARY'S HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
<b>III.</b>	<b>DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>			
<b>A.</b>	<b>DISCHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,735	3,627	(108)
2	MEDICARE	5,576	5,198	(378)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,197	3,231	34
4	MEDICAID	3,197	3,231	34
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	26	22	(4)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	128	170	42
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>8,799</b>	<b>8,451</b>	<b>(348)</b>
	<b>TOTAL DISCHARGES</b>	<b>12,534</b>	<b>12,078</b>	<b>(456)</b>
<b>B.</b>	<b>PATIENT DAYS</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13,326	12,720	(606)
2	MEDICARE	29,268	26,064	(3,204)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13,247	12,716	(531)
4	MEDICAID	13,247	12,716	(531)
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	74	56	(18)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	372	547	175
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>42,589</b>	<b>38,836</b>	<b>(3,753)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>55,915</b>	<b>51,556</b>	<b>(4,359)</b>
<b>C.</b>	<b>AVERAGE LENGTH OF STAY (ALOS)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.5	(0.1)
2	MEDICARE	5.2	5.0	(0.2)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.1	3.9	(0.2)
4	MEDICAID	4.1	3.9	(0.2)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	2.8	2.5	(0.3)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.9	3.2	0.3
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.8</b>	<b>4.6</b>	<b>(0.2)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.5</b>	<b>4.3</b>	<b>(0.2)</b>
<b>D.</b>	<b>CASE MIX INDEX</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.20244	1.21720	0.01476
2	MEDICARE	1.51260	1.50080	(0.01180)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.04410	1.00640	(0.03770)
4	MEDICAID	1.04410	1.00640	(0.03770)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.86190	0.63800	(0.22390)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.04690	1.01390	(0.03300)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.34045</b>	<b>1.30953</b>	<b>(0.03092)</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.29933</b>	<b>1.28181</b>	<b>(0.01752)</b>
<b>E.</b>	<b>OTHER REQUIRED DATA</b>			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$184,186,821	\$213,380,600	\$29,193,779
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$74,070,522	\$85,486,463	\$11,415,941
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$110,116,299	\$127,894,137	\$17,777,838
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	59.79%	59.94%	0.15%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$8,576,435	\$9,490,298	\$913,863
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,242,323	\$6,038,912	\$796,589
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$629,356	\$384,059	(\$245,297)
9	BAD DEBTS	\$7,589,833	\$10,501,359	\$2,911,526
10	TOTAL UNCOMPENSATED CARE	\$8,219,189	\$10,885,418	\$2,666,229
11	TOTAL OTHER OPERATING REVENUE	\$184,186,821	\$213,380,600	\$29,193,779
12	TOTAL OPERATING EXPENSES	\$205,686,874	\$218,384,632	\$12,697,758

SAINT MARY'S HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
<b>IV.</b>	<b>DSH UPPER PAYMENT LIMIT CALCULATIONS</b>			
<b>A.</b>	<b>CASE MIX ADJUSTED DISCHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,491.11340	4,414.78440	(76.32900)
2	MEDICARE	8,434.25760	7,801.15840	(633.09920)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,337.98770	3,251.67840	(86.30930)
4	MEDICAID	3,337.98770	3,251.67840	(86.30930)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	22.40940	14.03600	(8.37340)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	134.00320	172.36300	38.35980
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>11,794.65470</b>	<b>11,066.87280</b>	<b>(727.78190)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>16,285.76810</b>	<b>15,481.65720</b>	<b>(804.11090)</b>
<b>B.</b>	<b>OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,824.89896	7,382.64276	1,557.74380
2	MEDICARE	2,832.22416	3,577.61545	745.39129
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,752.38649	6,480.56410	728.17761
4	MEDICAID	5,752.38649	6,480.56410	728.17761
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	61.24757	103.10790	41.86033
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	610.73824	959.74937	349.01112
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>8,645.85822</b>	<b>10,161.28745</b>	<b>1,515.42923</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>14,470.75719</b>	<b>17,543.93021</b>	<b>3,073.17302</b>
<b>C.</b>	<b>INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,530.97	\$8,610.51	\$79.54
2	MEDICARE	\$8,448.71	\$8,390.81	(\$57.91)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,348.35	\$5,973.33	\$624.98
4	MEDICAID	\$5,348.35	\$5,973.33	\$624.98
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$4,437.33	\$3,748.43	(\$688.90)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$197.83	\$556.12	\$358.29
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,563.66</b>	<b>\$7,674.61</b>	<b>\$110.95</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,830.42</b>	<b>\$7,941.49</b>	<b>\$111.08</b>
<b>D.</b>	<b>OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,138.64	\$6,430.34	\$291.70
2	MEDICARE	\$5,594.47	\$5,484.62	(\$109.85)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,530.12	\$2,975.39	\$445.27
4	MEDICAID	\$2,530.12	\$2,975.39	\$445.27
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$2,643.97	\$1,531.88	(\$1,112.09)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$391.10	\$442.00	\$50.90
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$3,534.75</b>	<b>\$3,844.20</b>	<b>\$309.45</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$4,582.89</b>	<b>\$4,932.47</b>	<b>\$349.58</b>

SAINT MARY'S HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$17,627,327	\$16,261,224	(\$1,366,103)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,283,543	\$6,190,062	\$1,906,519
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$21,910,871</b>	<b>\$22,451,287</b>	<b>\$540,416</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$509,570,826	\$571,618,009	\$62,047,183
2	TOTAL GOVERNMENT DEDUCTIONS	\$205,612,282	\$234,241,484	\$28,629,202
3	UNCOMPENSATED CARE	\$8,219,189	\$10,885,418	\$2,666,229
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$110,116,299	\$127,894,137	\$17,777,838
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,242,323	\$6,038,912	\$796,589
6	TOTAL ADJUSTMENTS	\$329,190,093	\$379,059,951	\$49,869,858
7	TOTAL ACCRUED PAYMENTS	\$180,380,733	\$192,558,058	\$12,177,325
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$180,380,733	\$192,558,058	\$12,177,325
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3539855969	0.3368649255	(0.0171206714)
11	COST OF UNCOMPENSATED CARE	\$2,909,475	\$3,666,916	\$757,441
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$10,604,988	\$6,350,649	(\$4,254,338)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$13,514,462	\$10,017,565	(\$3,496,897)
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	53.24%	54.08%	0.83%
2	MEDICARE	52.94%	49.40%	-3.54%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	41.13%	43.65%	2.52%
4	MEDICAID	41.13%	43.65%	2.52%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	36.51%	37.69%	1.17%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.97%	4.41%	2.44%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>50.04%</b>	<b>47.95%</b>	<b>-2.09%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>50.96%</b>	<b>49.69%</b>	<b>-1.27%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.86%	33.18%	1.32%
2	MEDICARE	23.18%	21.52%	-1.66%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	18.64%	21.60%	2.97%
4	MEDICAID	18.64%	21.60%	2.97%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	25.24%	24.14%	-1.10%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.72%	3.45%	-0.27%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>20.77%</b>	<b>21.57%</b>	<b>0.79%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>25.57%</b>	<b>26.69%</b>	<b>1.12%</b>

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$193,842,245	\$209,482,388	\$15,640,143
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$193,842,245</b>	<b>\$209,482,388</b>	<b>\$15,640,143</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$13,512,756	\$16,260,614	\$2,747,858
4	<b>CALCULATED NET REVENUE</b>	<b>\$207,355,001</b>	<b>\$225,743,002</b>	<b>\$18,388,001</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$207,355,000	\$225,742,944	\$18,387,944
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$1</b>	<b>\$58</b>	<b>\$57</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$509,570,826	\$571,618,009	\$62,047,183
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$509,570,826</b>	<b>\$571,618,009</b>	<b>\$62,047,183</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$509,571,000	\$571,618,009	\$62,047,009
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$174)</b>	<b>\$0</b>	<b>\$174</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$8,219,189	\$10,885,418	\$2,666,229
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$8,219,189</b>	<b>\$10,885,418</b>	<b>\$2,666,229</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$8,219,189	\$10,885,418	\$2,666,229
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>



<b>SAINT MARY'S HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2012</b> <b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>
<b>I.</b>	<b>ACCRUED CHARGES AND PAYMENTS</b>	
<b>A.</b>	<b>INPATIENT ACCRUED CHARGES</b>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$70,295,781
2	MEDICARE	132,497,985
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	44,498,586
4	MEDICAID	44,498,586
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	139,608
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,175,963
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$177,136,179</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$247,431,960</b>
<b>B.</b>	<b>OUTPATIENT ACCRUED CHARGES</b>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$143,084,819
2	MEDICARE	91,194,082
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	89,252,844
4	MEDICAID	89,252,844
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	654,304
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	12,284,583
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$181,101,230</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$324,186,049</b>
<b>C.</b>	<b>TOTAL ACCRUED CHARGES</b>	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$213,380,600
2	TOTAL GOVERNMENT ACCRUED CHARGES	358,237,409
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$571,618,009</b>
<b>D.</b>	<b>INPATIENT ACCRUED PAYMENTS</b>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$38,013,546
2	MEDICARE	65,457,999
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,423,333
4	MEDICAID	19,423,333
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	52,613
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	95,854
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$84,933,945</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$122,947,491</b>
<b>E.</b>	<b>OUTPATIENT ACCRUED PAYMENTS</b>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$47,472,917
2	MEDICARE	19,621,848
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,282,183
4	MEDICAID	19,282,183
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	157,949
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	424,205
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$39,061,980</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$86,534,897</b>
<b>F.</b>	<b>TOTAL ACCRUED PAYMENTS</b>	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$85,486,463
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	123,995,925
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$209,482,388</b>

<b>SAINT MARY'S HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2012</b> <b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>
<b>II.</b>	<b>ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>	
<b>A.</b>	<b>ACCRUED DISCHARGES</b>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,627
2	MEDICARE	5,198
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,231
4	MEDICAID	3,231
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	22
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	170
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>8,451</b>
	<b>TOTAL DISCHARGES</b>	<b>12,078</b>
<b>B.</b>	<b>CASE MIX INDEX</b>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,21720
2	MEDICARE	1.50080
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.00640
4	MEDICAID	1.00640
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.63800
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.01390
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.30953</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.28181</b>
<b>C.</b>	<b>OTHER REQUIRED DATA</b>	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$213,380,600
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$85,486,463
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$127,894,137
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	59.94%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,490,298
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,038,912
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$384,059
9	BAD DEBTS	\$10,501,359
10	TOTAL UNCOMPENSATED CARE	\$10,885,418
11	TOTAL OTHER OPERATING REVENUE	\$7,571,760
12	TOTAL OPERATING EXPENSES	\$218,384,632

<b>SAINT MARY'S HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2012</b> <b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>
<b>III.</b>	<b>NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>	
<b>A.</b>	<b>RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>	
1	TOTAL ACCRUED PAYMENTS	\$209,482,388
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$209,482,388</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$16,260,614
	<b>CALCULATED NET REVENUE</b>	<b>\$225,743,002</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$225,742,944
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$58</b>
<b>B.</b>	<b>RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>	
1	OHCA DEFINED GROSS REVENUE	\$571,618,009
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$571,618,009</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$571,618,009
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>C.</b>	<b>RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,885,418
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$10,885,418</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,885,418
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A.</b>	<b><u>Hospital Charity Care (from HRS Report 500)</u></b>				
1	Number of Applicants	966	727	(239)	-25%
2	Number of Approved Applicants	574	466	(108)	-19%
3	<b>Total Charges (A)</b>	\$629,356	\$384,059	(\$245,297)	-39%
4	<b>Average Charges</b>	<b>\$1,096</b>	<b>\$824</b>	<b>(\$272)</b>	<b>-25%</b>
5	Ratio of Cost to Charges (RCC)	0.402420	0.397550	(0.004870)	-1%
6	<b>Total Cost</b>	<b>\$253,265</b>	<b>\$152,683</b>	<b>(\$100,583)</b>	<b>-40%</b>
7	<b>Average Cost</b>	<b>\$441</b>	<b>\$328</b>	<b>(\$114)</b>	<b>-26%</b>
8	Charity Care - Inpatient Charges	\$168,212	\$78,015	(\$90,197)	-54%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	217,315	136,053	(81,262)	-37%
10	Charity Care - Emergency Department Charges	243,829	169,991	(73,838)	-30%
11	<b>Total Charges (A)</b>	<b>\$629,356</b>	<b>\$384,059</b>	<b>(\$245,297)</b>	<b>-39%</b>
12	Charity Care - Number of Patient Days	38	38	0	0%
13	Charity Care - Number of Discharges	13	12	(1)	-8%
14	Charity Care - Number of Outpatient ED Visits	151	84	(67)	-44%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	409	375	(34)	-8%
<b>B.</b>	<b><u>Hospital Bad Debts (from HRS Report 500)</u></b>				
1	Bad Debts - Inpatient Services	\$1,937,180	\$2,680,299	\$743,119	38%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,002,847	1,387,548	384,701	38%
3	Bad Debts - Emergency Department	4,649,806	6,433,512	1,783,706	38%
4	<b>Total Bad Debts (A)</b>	<b>\$7,589,833</b>	<b>\$10,501,359</b>	<b>\$2,911,526</b>	<b>38%</b>
<b>C.</b>	<b><u>Hospital Uncompensated Care (from HRS Report 500)</u></b>				
1	Charity Care (A)	\$629,356	\$384,059	(\$245,297)	-39%
2	Bad Debts (A)	7,589,833	10,501,359	2,911,526	38%
3	<b>Total Uncompensated Care (A)</b>	<b>\$8,219,189</b>	<b>\$10,885,418</b>	<b>\$2,666,229</b>	<b>32%</b>
4	Uncompensated Care - Inpatient Services	\$2,105,392	\$2,758,314	\$652,922	31%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,220,162	1,523,601	303,439	25%
6	Uncompensated Care - Emergency Department	4,893,635	6,603,503	1,709,868	35%
7	<b>Total Uncompensated Care (A)</b>	<b>\$8,219,189</b>	<b>\$10,885,418</b>	<b>\$2,666,229</b>	<b>32%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					

SAINT MARY'S HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,					
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>NON-GOVERNMENT</u>	<u>NON-GOVERNMENT</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	<b><u>COMMERCIAL - ALL PAYERS</u></b>				
1	Total Gross Revenue	\$184,186,821	\$213,380,600	\$29,193,779	16%
2	Total Contractual Allowances	\$110,116,299	\$127,894,137	\$17,777,838	16%
	<b>Total Accrued Payments (A)</b>	<b>\$74,070,522</b>	<b>\$85,486,463</b>	<b>\$11,415,941</b>	<b>15%</b>
	<b>Total Discount Percentage</b>	<b>59.79%</b>	<b>59.94%</b>	<b>0.15%</b>	<b>0%</b>
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
<b>A.</b>	<b><u>Gross and Net Revenue</u></b>			
1	Inpatient Gross Revenue	\$237,970,890	\$250,236,131	\$247,431,960
2	Outpatient Gross Revenue	\$243,048,916	\$259,334,695	\$324,186,049
3	Total Gross Patient Revenue	\$481,019,806	\$509,570,826	\$571,618,009
4	Net Patient Revenue	\$198,455,064	\$207,355,344	\$225,742,944
<b>B.</b>	<b><u>Total Operating Expenses</u></b>			
1	Total Operating Expense	\$196,985,263	\$205,686,874	\$218,384,632
<b>C.</b>	<b><u>Utilization Statistics</u></b>			
1	Patient Days	52,607	55,915	51,556
2	Discharges	12,208	12,534	12,078
3	Average Length of Stay	4.3	4.5	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	106,337	113,863	119,105
0	Equivalent (Adjusted) Discharges (ED)	24,677	25,524	27,903
<b>D.</b>	<b><u>Case Mix Statistics</u></b>			
1	Case Mix Index	1.28418	1.29933	1.28181
2	Case Mix Adjusted Patient Days (CMAPD)	67,557	72,652	66,085
3	Case Mix Adjusted Discharges (CMAD)	15,677	16,286	15,482
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	136,555	147,945	152,669
5	Case Mix Adjusted Equivalent Discharges (CMAED)	31,689	33,164	35,766
<b>E.</b>	<b><u>Gross Revenue Per Statistic</u></b>			
1	Total Gross Revenue per Patient Day	\$9,144	\$9,113	\$11,087
2	Total Gross Revenue per Discharge	\$39,402	\$40,655	\$47,327
3	Total Gross Revenue per EPD	\$4,524	\$4,475	\$4,799
4	Total Gross Revenue per ED	\$19,493	\$19,965	\$20,486
5	Total Gross Revenue per CMAEPD	\$3,523	\$3,444	\$3,744
6	Total Gross Revenue per CMAED	\$15,179	\$15,365	\$15,982
7	Inpatient Gross Revenue per EPD	\$2,238	\$2,198	\$2,077
8	Inpatient Gross Revenue per ED	\$9,644	\$9,804	\$8,868

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
<b>F.</b>	<b>Net Revenue Per Statistic</b>			
1	Net Patient Revenue per Patient Day	\$3,772	\$3,708	\$4,379
2	Net Patient Revenue per Discharge	\$16,256	\$16,543	\$18,690
3	Net Patient Revenue per EPD	\$1,866	\$1,821	\$1,895
4	Net Patient Revenue per ED	\$8,042	\$8,124	\$8,090
5	Net Patient Revenue per CMAEPD	\$1,453	\$1,402	\$1,479
6	Net Patient Revenue per CMAED	\$6,263	\$6,252	\$6,312
<b>G.</b>	<b>Operating Expense Per Statistic</b>			
1	Total Operating Expense per Patient Day	\$3,744	\$3,679	\$4,236
2	Total Operating Expense per Discharge	\$16,136	\$16,410	\$18,081
3	Total Operating Expense per EPD	\$1,852	\$1,806	\$1,834
4	Total Operating Expense per ED	\$7,983	\$8,059	\$7,827
5	Total Operating Expense per CMAEPD	\$1,443	\$1,390	\$1,430
6	Total Operating Expense per CMAED	\$6,216	\$6,202	\$6,106
<b>H.</b>	<b>Nursing Salary and Fringe Benefits Expense</b>			
1	Nursing Salary Expense	\$27,239,418	\$28,268,013	\$30,432,420
2	Nursing Fringe Benefits Expense	\$6,590,600	\$6,406,028	\$7,090,223
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$33,830,018</b>	<b>\$34,674,041</b>	<b>\$37,522,643</b>
<b>I.</b>	<b>Physician Salary and Fringe Expense</b>			
1	Physician Salary Expense	\$2,877,015	\$2,984,635	\$3,151,771
2	Physician Fringe Benefits Expense	\$847,264	\$989,413	\$1,050,785
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$3,724,279</b>	<b>\$3,974,048</b>	<b>\$4,202,556</b>
<b>J.</b>	<b>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>			
1	Non-Nursing, Non-Physician Salary Expense	\$43,621,631	\$45,248,376	\$51,014,766
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$15,404,495	\$15,952,796	\$18,431,260
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$59,026,126</b>	<b>\$61,201,172</b>	<b>\$69,446,026</b>
<b>K.</b>	<b>Total Salary and Fringe Benefits Expense</b>			
1	Total Salary Expense	\$73,738,064	\$76,501,024	\$84,598,957
2	Total Fringe Benefits Expense	\$22,842,359	\$23,348,237	\$26,572,268
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$96,580,423</b>	<b>\$99,849,261</b>	<b>\$111,171,225</b>

SAINT MARY'S HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
<b>L.</b>	<b><u>Total Full Time Equivalent Employees (FTEs)</u></b>			
1	Total Nursing FTEs	328.2	339.7	361.6
2	Total Physician FTEs	52.2	52.5	53.6
3	Total Non-Nursing, Non-Physician FTEs	818.3	845.7	940.0
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>1,198.7</b>	<b>1,237.9</b>	<b>1,355.2</b>
<b>M.</b>	<b><u>Nursing Salaries and Fringe Benefits Expense per FTE</u></b>			
1	Nursing Salary Expense per FTE	\$82,996	\$83,215	\$84,160
2	Nursing Fringe Benefits Expense per FTE	\$20,081	\$18,858	\$19,608
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$103,077</b>	<b>\$102,073</b>	<b>\$103,768</b>
<b>N.</b>	<b><u>Physician Salary and Fringe Expense per FTE</u></b>			
1	Physician Salary Expense per FTE	\$55,115	\$56,850	\$58,802
2	Physician Fringe Benefits Expense per FTE	\$16,231	\$18,846	\$19,604
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$71,346</b>	<b>\$75,696</b>	<b>\$78,406</b>
<b>O.</b>	<b><u>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</u></b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$53,308	\$53,504	\$54,271
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$18,825	\$18,863	\$19,608
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$72,133</b>	<b>\$72,367</b>	<b>\$73,879</b>
<b>P.</b>	<b><u>Total Salary and Fringe Benefits Expense per FTE</u></b>			
1	Total Salary Expense per FTE	\$61,515	\$61,799	\$62,425
2	Total Fringe Benefits Expense per FTE	\$19,056	\$18,861	\$19,608
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$80,571</b>	<b>\$80,660</b>	<b>\$82,033</b>
<b>Q.</b>	<b><u>Total Salary and Fringe Ben. Expense per Statistic</u></b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,836	\$1,786	\$2,156
2	Total Salary and Fringe Benefits Expense per Discharge	\$7,911	\$7,966	\$9,204
3	Total Salary and Fringe Benefits Expense per EPD	\$908	\$877	\$933
4	Total Salary and Fringe Benefits Expense per ED	\$3,914	\$3,912	\$3,984
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$707	\$675	\$728
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,048	\$3,011	\$3,108